

Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2000

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation), section 527, or section 4947(a)(1) nonexempt charitable trust

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2000 calendar year, OR tax year period beginning **JUL 1, 2000** and ending **JUN 30, 2001**

B Check if applicable: <input type="checkbox"/> Change of address <input type="checkbox"/> Change of name <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return (use also for state reporting)	Please use IRS label or print or type. See Specific Instructions	C Name of organization PHI KAPPA TAU FOUNDATION		D Employer identification number 31-6024975
		Number and street (or P O box if mail is not delivered to street address)		Room/suite
		5221 MORNING SUN ROAD		E Telephone number 513-523-1778
City or town, state or country, and ZIP		F Check <input type="checkbox"/> if application pending		
OXFORD, OH 45056				

G Organization type (check only one) 501(c)(3) (insert no) 527 OR 4947(a)(1)

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

J Accounting method Cash Accrual Other (specify)

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

(H and I are not applicable to section 527 orgs)
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates **N/A**
H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Enter 4-digit group exemption no. (GEN) **N/A**
L Check this box if the organization is not required to attach Schedule B (Form 990 or 990-EZ)

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

		Revenue		Expenses		Net Assets	
1	Contributions, gifts, grants, and similar amounts received						
a	Direct public support	1a	744,291.				
b	Indirect public support	1b					
c	Government contributions (grants)	1c					
d	Total (add lines 1a through 1c) (cash \$ 744,291. noncash \$ _____)	1d	744,291.				
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	1,350.				
3	Membership dues and assessments	3					
4	Interest on savings and temporary cash investments	4					
5	Dividends and interest from securities	5	440,963.				
6a	Gross rents SEE STATEMENT 1	6a	59,796.				
b	Less rental expenses	6b					
c	Net rental income (loss) (subtract line 6b from line 6a)	6c	59,796.				
7	Other investment income (describe PARTNERSHIP INCOME)	7	2,011.				
8a	Gross amount from sale of assets other than inventory	(A) Securities 487,878. 8a		(B) Other			
b	Less cost or other basis and sales expenses	277,048. 8b					
c	Gain or (loss) (attach schedule)	210,830. 8c					
d	Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 2	8d	210,830.				
9	Special events and activities (attach schedule)						
a	Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a					
b	Less direct expenses other than fundraising expenses	9b					
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c					
10a	Gross sales of inventory, less returns and allowances	10a					
b	Less cost of goods sold	10b					
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c					
11	Other revenue (from Part VII, line 103)	11					
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	1,459,241.				
13	Program services (from line 44, column (B))	13	898,040.				
14	Management and general (from line 44, column (C))	14	193,286.				
15	Fundraising (from line 44, column (D))	15	328,586.				
16	Payments to affiliates (attach schedule)	16					
17	Total expenses (add lines 16 and 44, column (A))	17	1,419,912.				
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	39,329.				
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	11,852,136.				
20	Other changes in net assets or fund balances (attach explanation) SEE STATEMENT 3	20	<1,300,188.>				
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	10,591,277.				

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Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
22 Grants and allocations (attach schedule) cash \$ _____ noncash \$ _____					
23 Specific assistance to individuals (attach schedule)	499,336.	499,336.			
24 Benefits paid to or for members (attach schedule)					
25 Compensation of officers, directors, etc	138,560.	60,966.	38,797.	38,797.	
26 Other salaries and wages	130,808.	57,556.	36,626.	36,626.	
27 Pension plan contributions					
28 Other employee benefits	32,175.	14,157.	9,009.	9,009.	
29 Payroll taxes	18,314.	8,058.	5,128.	5,128.	
30 Professional fundraising fees					
31 Accounting fees	4,650.	2,046.	1,302.	1,302.	
32 Legal fees					
33 Supplies					
34 Telephone	10,236.	4,504.	2,866.	2,866.	
35 Postage and shipping	7,950.	3,498.	2,226.	2,226.	
36 Occupancy	21,669.	9,535.	5,740.	6,394.	
37 Equipment rental and maintenance	42,253.	18,590.	11,831.	11,832.	
38 Printing and publications	92,426.	92,426.			
39 Travel	6,781.	2,984.	1,871.	1,926.	
40 Conferences, conventions, and meetings	28,765.	12,657.	8,054.	8,054.	
41 Interest	33,580.	14,010.	10,033.	9,537.	
42 Depreciation, depletion, etc (attach schedule)	70,873.	31,184.	19,561.	20,128.	
43 Other expenses (itemize)					
a _____	43a				
b _____	43b				
c _____	43c				
d _____	43d				
e SEE STATEMENT 4	43e	281,536.	66,533.	40,242.	174,761.
44 Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	1,419,912.	898,040.	193,286.	328,586.

Reporting of Joint Costs Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A, (ii) the amount allocated to Program services \$ N/A, (iii) the amount allocated to Management and general \$ N/A, and (iv) the amount allocated to Fundraising \$ N/A

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose?	Program Service Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others)
SUPPORT EDUCATIONAL UNDERTAKINGS OF PHI KAPPA TAU All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
a FRATERNITY EDUCATIONAL SUPPORT - PROVIDES SUPPORT FOR VARIOUS EDUCATIONAL PROGRAMS OF THE FRATERNITY, INCLUDING LEADERSHIP ACADEMY AND OFFICER'S INSTITUTE. (Grants and allocations \$ _____)	339,025.
b SCHOLARSHIP- PROVIDES FUNDS FOR SCHOLARSHIP AND FINANCIAL ASSISTANCE TO PHI KAPPA TAU COLLEGIATES AND ALUMNAE. (Grants and allocations \$ _____)	238,528.
c LAUREL PUBLICATION-PROVIDES FUNDS TO PUBLISH THE LAUREL, THE OFFICIAL MAGAZINE OF THE FRATERNITY. (Grants and allocations \$ _____)	320,487.
d _____ (Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B) Program services)	898,040.

Part IV Balance Sheets

Note Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	793,563.	45	768,840.
	46 Savings and temporary cash investments		46	
	47 a Accounts receivable	47a 219,432.		
	b Less allowance for doubtful accounts	47b 130,161.	89,026.	47c 89,271.
	48 a Pledges receivable	48a		
	b Less allowance for doubtful accounts	48b		48c
	49 Grants receivable			49
	50 Receivables from officers, directors, trustees, and key employees			50
	51 a Other notes and loans receivable	51a 70,936.		
	b Less allowance for doubtful accounts STMT 5	51b		51c 70,936.
	52 Inventories for sale or use		48,231.	52 48,231.
	53 Prepaid expenses and deferred charges		5,495.	53 76.
	54 Investments - securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV		54
	55 a Investments - land, buildings, and equipment basis	55a		
	b Less accumulated depreciation	55b		55c
56 Investments - other	SEE STATEMENT 6	10,228,568.	56	8,859,673.
57 a Land, buildings, and equipment basis	57a 1,469,072.			
b Less accumulated depreciation STMT 7	57b 206,534.	1,306,534.	57c 1,262,538.	
58 Other assets (describe <input type="checkbox"/> SEE STATEMENT 8)		18,267.	58 18,267.	
59 Total assets (add lines 45 through 58) (must equal line 74)		12,489,684.	59	11,117,832.
Liabilities	60 Accounts payable and accrued expenses	188,338.	60	134,386.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable STMT 9		449,210.	64b 392,169.
	65 Other liabilities (describe <input type="checkbox"/>)			65
66 Total liabilities (add lines 60 through 65)		637,548.	66	526,555.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	2,756,740.	67	2,300,248.
	68 Temporarily restricted	2,318,160.	68	2,547,404.
	69 Permanently restricted	6,777,236.	69	5,743,625.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19 and column (B) must equal line 21)		11,852,136.	73	10,591,277.
74 Total liabilities and net assets / fund balances (add lines 66 and 73)		12,489,684.	74	11,117,832.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part VI Other Information		N/A	Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77		X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	X	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X	
b	If "Yes," enter the name of the organization SEE STATEMENT 11 _____ and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt			
81 a	Enter the amount of political expenditures direct or indirect, as described in the instructions for line 81	81a		0.
b	Did the organization file Form 1120-POL for this year?	81b		X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II (See instructions for reporting in Part III)	82b		NOT DETERMINABLE
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		N/A
85 a	501(c)(4), (5), or (6) organizations: Were substantially all dues nondeductible by members?	85a		N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85b		N/A
c	Dues, assessments, and similar amounts from members	85c		N/A
d	Section 162(e) lobbying and political expenditures	85d		N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e		N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f		N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g		N/A
h	If section 6033(e)(1)(A) dues notice were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		N/A
86 a	501(c)(7) organizations: Enter initiation fees and capital contributions included on line 12	86a		N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b		N/A
87 a	501(c)(12) organizations: Enter gross income from members or shareholders	87a		N/A
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b		N/A
88	At any time during the year did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88		X
89 a	501(c)(3) organizations: Enter amount of tax imposed on the organization during the year under section 4911 <u>0.</u> , section 4912 <u>0.</u> , section 4955 <u>0.</u>			0.
b	501(c)(3) and 501(c)(4) organizations: Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		X
c	Enter amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			0.
d	Enter amount of tax on line 89c, above reimbursed by the organization			0.
90 a	List the states with which a copy of this return is filed <u>OHIO</u>			
b	Number of employees employed in the pay period that includes March 12, 2000	90b		8

91 The books are in care of **BARBARA FABELO** Telephone no **513-523-1778**
 Located at **5221 MORNING SUN ROAD, OXFORD, OHIO** ZIP code **45056**

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year **92** **N/A**

Part VII Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a ELFERS ADMINISTRATIVE F					1,350.
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	440,963.	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property			16	59,796.	
98 Net rental income or (loss) from personal property					
99 Other investment income	531390	2,011.			
100 Gain or (loss) from sales of assets other than inventory			18	210,830.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		2,011.		711,589.	1,350.
105 Total (add line 104, columns (B), (D), and (E))					714,950.

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93A	REVENUES RECEIVED IN CONNECTION WITH ACTIVITIES THAT SUPPORT THE EDUCATIONAL UNDERTAKING OF THE PHI KAPPA TAU FRATERNITY AND ITS CHAPTERS

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

accompanying schedules and statements and to the best of my knowledge and belief, it is true and correct information of which preparer has any knowledge. (Important: See General Instruction W)

1/2/02 JOHN M GREEN, Executive Dir

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

2000

Department of the Treasury
Internal Revenue Service

Supplementary Information

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization **PHI KAPPA TAU FOUNDATION** Employer identification number **31 6024975**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See instructions List each one If there are none, enter "None")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE -----				

Total number of other employees paid over \$50,000 ▶	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See instructions List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
S. ROSENTHAL & CO., INC. ----- P.O.BOX 691423, CINCINNATI, OH 45269-1423	PRINTING SERVICE	84,485.
THE WORLDHANDLERS, INC. ----- 1863 CRAIG PARK COURT, ST. LOUIS, MO 63146	DIRECT MAIL CAMPAIGN	80,896.

Total number of others receiving over \$50,000 for professional services ▶	0	

Part III Statements About Activities

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities		X
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? <i>SEE FORM 990 PART V</i>	X	
e	Transfer of any part of its income or assets? If the answer to any question is "Yes," attach a detailed statement explaining the transactions		X
3	Does the organization make grants for scholarships, fellowships, student loans, etc.?	X	
4 a	Do you have a section 403(b) annuity plan for your employees?	X	
b	Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments (See page 2 of the instructions) SEE STATEMENT 12		

Part IV Reason for Non-Private Foundation Status (See pages 2 through 5 of the instructions)

- The organization is not a private foundation because it is (Please check only ONE applicable box)
- 5** A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
 - 6** A school Section 170(b)(1)(A)(ii) (Also complete Part V, page 5)
 - 7** A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
 - 8** A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
 - 9** A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ► _____
 - 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
 - 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
 - 11b** A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
 - 12** An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)
 - 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14** An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting
 Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total
15 Gifts, grants and contributions received (Do not include unusual grants. See line 28)	544,463.	328,662.	383,735.	322,626.	1,579,486.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose	2,726.	263,548.	1,506.	23,360.	291,140.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	759,841.	672,219.	728,645.	963,640.	3,124,345.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization a benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	1,307,030.	1,264,429.	1,113,886.	1,309,626.	4,994,971.
24 Line 23 minus line 17	1,304,304.	1,000,881.	1,112,380.	1,286,266.	4,703,831.
25 Enter 1% of line 23	13,070.	12,644.	11,139.	13,096.	
26 Organizations described on lines 10 or 11 a Enter 2% of amount in column (e), line 24					26a 94,077.
b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1996 through 1999 exceeded the amount shown in line 26a Enter the sum of all these excess amounts					26b 0.
c Total support for section 509(a)(1) test Enter line 24, column (e)					26c 4,703,831.
d Add Amounts from column (e) for lines 18 <u>3,124,345.</u> 19 _____ 22 _____ 26b _____					26d 3,124,345.
e Public support (line 26c minus line 26d total)					26e 1,579,486.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 33.5787%
27 Organizations described on line 12 a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list (which is not open to public inspection) to show the name of, and total amounts received in each year from, each "disqualified person" Enter the sum of such amounts for each year (1999) <u>N/A</u> (1998) _____ (1997) _____ (1996) _____					
b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year <u>N/A</u> (1999) _____ (1998) _____ (1997) _____ (1996) _____					
c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c N/A
d Add Line 27a total _____ and line 27b total _____					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test Enter amount on line 23, column (e) 27f <u>N/A</u>					
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants For an organization described in line 10, 11, or 12, that received any unusual grants during 1996 through 1999, attach a list (which is not open to public inspection) for each year showing the name of the contributor the date and amount of the grant and a brief description of the nature of the grant Do not include these grants in line 15 (See page 5 of the instructions)

NONE

Part V Private School Questionnaire
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (if you need more space, attach a separate statement)		
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (if you need more space, attach a separate statement)		
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (if you need more space, attach a separate statement)		
34	a Does the organization receive any financial aid or assistance from a governmental agency?		
	b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities

(To be completed ONLY by an eligible organization that filed Form 5768)

N/A

- Check here If the organization belongs to an affiliated group
 Check here If you checked "a" above and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)		
37	Total lobbying expenditures to influence a legislative body (direct lobbying)		
38	Total lobbying expenditures (add lines 36 and 37)		
39	Other exempt purpose expenditures		
40	Total exempt purpose expenditures (add lines 38 and 39)		
41	Lobbying nontaxable amount. Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is - Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)		
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36		
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38		

Caution If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 9 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A (e) Total
	(a) 2000	(b) 1999	(c) 1998	(d) 1997	
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (include compensation in expenses reported on lines c through h)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (add lines c through h)			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Schedule B
(Form 990 or 990-EZ)

Schedule of Contributors

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

Supplementary Information for line 1d of Form 990 or
line 1 of Form 990-EZ (see instructions)

2000

Name of organization **PHI KAPPA TAU FOUNDATION** Employer identification number **31-6024975**

Organization type (check one)-Section 501(c)(3) (enter number) 527 or 4947(a)(1) nonexempt charitable trust

A Section 501(c)(7), (8), or (10) organizations-

Check this box if the organization had no charitable contributors who contributed more than \$1,000 during the year (But see General rule below)

Enter here the total gifts received during the year for a religious, charitable, etc., purpose **\$**

Note: This form is generally not open to public inspection except for section 527 organizations.

General Instructions

Purpose of Form

Schedule B (Form 990 or 990-EZ) is used by organizations required to file Form 990, Return of Organization Exempt From Income Tax, or Form 990-EZ, Short Form Return of Organization Exempt From Income tax, to provide the information regarding their contributors that is required for line 1d of Form 990 (or line 1 of Form 990-EZ)

Attach the Schedule B (Form 990 or 990-EZ) to Form 990 or 990-EZ. Attach Schedule B after Schedule A (Form 990 or 990-EZ), Organization Exempt Under Section 501(c)(3), if that return is required for the organization.

Who Must File Schedule B (Form 990 or 990-EZ)

All organizations must file Schedule B (Form 990 or 990-EZ) unless they certify that they do not meet the filing requirements of Schedule B (Form 990 or 990-EZ) by checking the box in item L of the heading of their Form 990 or Form 990-EZ.

See the instructions for item L in the instructions for Form 990 and Form 990-EZ.

Caution Schedule B (Form 990 or 990-EZ) is not a substitute for the list of "contributors" required for Part IV-A, Support Schedule, of Schedule A (Form 990 or 990-EZ).

Public Inspection

Schedule B (Form 990 or 990-EZ) is

- Open to public inspection for a section 527 political organization
- Generally not open to public inspection for the other organizations that must file this form

If a non-section 527 organization files a copy of Form 990, or Form 990-EZ, and attachments with any state, it should not include its Schedule B (Form 990 or 990-EZ) in the attachments for the state unless a schedule of contributors is specifically required by the state. States that do not require the information might make the schedule available for public inspection along with the rest of the Form 990 or Form 990-EZ.

See the instructions for Form 990 and Form 990-EZ for phone help and the public inspection rules for those forms and their attachments, which include Schedule B (Form 990 or 990-EZ).

Contributors Required To Be Listed On Part I

"Contributor" includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations.

General rule. Unless the organization is covered by one of the special rules below, it must list on Part I every contributor who during the year, gave the organization directly or indirectly, money, securities, or any other type of property totaling \$5,000 or more for the year. Also complete Part II for a noncash contribution. In determining the \$5,000 amount, total all of the contributor's gifts of \$1,000 or more for the year.

Section 501(c)(3) organizations. For an organization described in section 501(c)(3) that meets the 33 1/3% support test of the Regulations under sections 509(a)(1)/170(b)(1)(A)(vi) (whether or not the organization is otherwise described in section 170(b)(1)(A))-

List in Part I only those contributors whose contribution of \$5,000 or more is greater than 2% of the amount reported on line 1d of Form 990 (or line 1 of Form 990-EZ) (Regulations section 1.6033-2(a)(2)(iii)(a)).

Example. A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on line 1d of its Form 990. The organization is only required to list in Parts I and II of its Schedule B (Form 990 or 990-EZ) each person who contributed more than the

greater of \$5,000 or \$14,000 (2% of \$700,000). Thus, a contributor who gave a total of \$11,000 would not be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization exceeded \$5,000, it did not exceed \$14,000.

Section 501(c)(7), (8), or (10) organizations. For noncharitable contributions to one of these organizations, list in Part I contributors who gave \$5,000 or more as described in the General rule discussed above.

If a section 501(c)(7), (8), or (10) organization received contributions or bequests for use exclusively for religious, charitable, etc., purposes (sections 170(c)(4), 2055(a)(3), or 2522(a)(3))-

List in Part I each contributor whose contributions total more than \$1,000 during the year that were for a religious, charitable, etc., purpose. To determine the \$1,000, aggregate all of a contributor's gifts for the year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that received any charitable contributions and listed any charitable contributors on Part I must also complete Part III.

If section 501(c)(7), (8), or (10) organization received charitable gifts, but is not required to list any charitable contributors on Part I, check the box on line A at the top of Schedule B (Form 990 or 990-EZ) and enter the amount of charitable contributions received in the space provided. The organization need not complete and attach Part III.

Specific Instructions

Note. You may duplicate Parts I, II, and III if more copies are needed. Number each page of each Part.

Part I. In column (a), identify the first contributor listed as no. 1 and the second contributor as no. 2, etc. Number consecutively. Show the contributor's name, address, aggregate contributions for the year, and the type of contribution (e.g., whether an individual, payroll, or noncash contribution). Report payroll contributions by listing the employer's name, address, and total amount given (unless an employee gave enough to be listed individually).

Part II. In column (a), show the number that corresponds to the contributor's number in Part I. Describe the noncash contribution fully. Report on property with readily determinable market value (i.e., market quotations for securities) by listing its fair market value (FMV). For marketable securities registered and listed on a recognized securities exchange, measure market value by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When market value cannot be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution that is subject to an outstanding debt, subtract the debt from the property's fair market value.

Part III. Section 501(c)(7), (8), or (10) organizations that received contributions or bequests for use exclusively for religious, charitable, etc., purposes, must complete Parts I through III for those persons whose gifts totaled more than \$1,000 during the year. Show also, in the heading of Part III, total gifts that were \$1,000 or less and were for a religious, charitable, etc., purpose. Complete this information only on the first Part III page.

If an amount is set aside for a religious, charitable, etc., purpose, show in column (d) how the amount is held (e.g., whether it is mingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.

Name of organization PHI KAPPA TAU FOUNDATION	Employer identification number 31-6024975
---	---

Part I Contributors

(a) No	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
1		\$ 525,497.	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
6		\$ 22,500.	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
7		\$ 15,000.	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
9		\$ 128,217.	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
10		\$ _____	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
11		\$ _____	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
 - If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form)
- Note** Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time — Only submit original (no copies needed)

Note Form 990-T corporations requesting an automatic 6-month extension — check this box and complete Part I only
All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns
Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

Type or print File by the due date for filing your return See instructions	Name of Exempt Organization PHI KAPPA TAU FOUNDATION	Employer identification number 31-6024975
	Number, street and room or suite no. If a PO box, see instructions 5221 MORNING SUN ROAD	
	City, town or post office, state, and ZIP code For a foreign address, see instructions OXFORD OH 45056	

Check type of return to be filed (file a separate application for each return)

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until JANUARY 15, 2002, to file the exempt organization return for the organization named above. The extension is for the organization's return for

▶ calendar year 20 ____ or

▶ tax year beginning JULY 1, 2000, and ending JUNE 30, 2001

2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. \$ _____

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$ _____

c Balance Due Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions. \$ _____

Signature and Verification

Under penalties of perjury I declare that I have examined this form, including accompanying schedules and statements and to the best of my knowledge and belief, it is true correct and complete, and that I am authorized to prepare this form

Signature ▶ [Handwritten Signature] Title ▶ CFA Date ▶ 10/23/01

- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** and check this box **Note Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868**
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (not automatic) 3-Month Extension of Time — Must File Original and One Copy.			
Type or print File by the extended due date for filing the return See instructions	Name of Exempt Organization PHI KAPPA TAU FOUNDATION		Employer identification number 31-6024975
	Number, street, and room or suite no. If a PO box, see instructions 5221 MORNING SUN ROAD		For IRS use only
	City, town or post office, state, and ZIP code For a foreign address, see instructions OXFORD OH 45056		

Check type of return to be filed (File a separate application for each return)

Form 990
 Form 990-EZ
 Form 990-T (sec 401(a) or 408(a) trust)
 Form 1041-A
 Form 5227
 Form 8870
 Form 990-BL
 Form 990-PF
 Form 990-T (trust other than above)
 Form 4720
 Form 6069

STOP. Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the **whole** group, check this box If it is for **part** of the group, check this box and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until _____, 20 ____
- 5 For calendar year _____, or other tax year beginning _____, 20 ____ and ending _____, 20 ____
- 6 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period
- 7 State in detail why you need the extension _____

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions \$ _____

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ _____

c **Balance Due.** Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions \$ _____

Signature and Verification

Under penalties of perjury I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct and complete and that I am authorized to prepare this form

Signature ▶ _____ Title ▶ _____ Date ▶ _____

Notice to Applicant — To Be Completed by the IRS

- We have approved this application Please attach this form to the organization's return
- We have not approved this application However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions) This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return Please attach this form to the organization's return
- We have not approved this application After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file We are not granting a 10-day grace period
- We cannot consider this application because it was filed after the due date of the return for which an extension was requested
- Other _____

Director _____ By _____ Date _____

Alternate Mailing Address — Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above

Type or print	Name
	Number and street (Include suite, room, or apt. no.) Or a PO box number
	City or town, province or state, and country (Including postal or ZIP code)

FORM 990 RENTAL INCOME STATEMENT 1

KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
RENTAL INCOME, NON-DEBT FINANCING	2 3	59,796.
TOTAL TO FORM 990, PART I, LINE 6A		59,796.

FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 2

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
	487,878.	277,048.	0.	210,830.
TO FORM 990, PART I, LINE 8	487,878.	277,048.	0.	210,830.

FORM 990 OTHER CHANGES IN NET ASSETS OR FUND BALANCES STATEMENT 3

DESCRIPTION	AMOUNT
DEPRECIATION OF TRUST UNREALIZED LOSSES	<1,020,418.> <279,770.>
TOTAL TO FORM 990, PART I, LINE 20	<1,300,188.>

FORM 990 OTHER EXPENSES STATEMENT 4

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
FUNDRAISING	129,906.			129,906.
DUES AND MEMBERSHIP	20,271.	8,919.	5,595.	5,757.
INSURANCE	7,207.	3,171.	1,989.	2,047.
DIRECTOR OF DEVELOPMENT	1,490.	656.	417.	417.
PROFESSIONAL FEES	68,875.	30,305.	19,285.	19,285.
ELFER'S ADMIN FEE	1,350.	1,350.		
OTHER ADMINISTRATIVE EXPENSE	12,990.	4,954.	2,270.	5,766.

PHI KAPPA TAU FOUNDATION

31-6024975

MISC.	39,447.	17,178.	10,686.	11,583.
TOTAL TO FM 990, LN 43	281,536.	66,533.	40,242.	174,761.

FORM 990 OTHER NOTES AND LOANS RECEIVABLE STATEMENT 5

DESCRIPTION	DOUBTFUL ACCT ALLOWANCE	BALANCE DUE
PKT FRATERNITY	0.	70,936.
TOTALS INCLUDED ON FORM 990, PART IV, LINE 51	0.	70,936.

FORM 990 OTHER INVESTMENTS STATEMENT 6

DESCRIPTION	VALUATION METHOD	AMOUNT
BENEFICIAL INVESTMENT IN PERPETUAL TRUST	MARKET VALUE	5,074,827.
BARCLAYS GLOBAL INVESTORS -BONDS	MARKET VALUE	2,925,553.
BARCLAYS GLOBAL INVESTORS-EQUITY FUND	MARKET VALUE	859,293.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		8,859,673.

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 7

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
BUILDING	1,244,143.	73,767.	1,170,376.
ADDITIONS: BUILDING	5,524.	1,012.	4,512.
COMPUTER & OFFICE EQUIPMENT	198,122.	130,930.	67,192.
ADDITIONS: COMPUTER & OFFICE EQUIPMENT	21,283.	825.	20,458.
TOTAL TO FORM 990, PART IV, LN 57	1,469,072.	206,534.	1,262,538.

FORM 990 OTHER ASSETS STATEMENT 8

DESCRIPTION	AMOUNT
CASH SURRENDER VALUE OF LIFE INS.	18,267.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	18,267.

FORM 990 MORTGAGES PAYABLE STATEMENT 9

DESCRIPTION	BALANCE DUE
TOTAL INCLUDED ON FORM 990, PART IV, LINE 64B, COLUMN B	392,169.
	392,169.

FORM 990 OTHER REVENUE NOT INCLUDED ON FORM 990 STATEMENT 10

DESCRIPTION	AMOUNT
DEPRECIATION OF PERPETUAL TRUST	<1,020,418.>
TOTAL TO FORM 990, PART IV-A	<1,020,418.>

FORM 990 IDENTIFICATION OF RELATED ORGANIZATIONS PART VI, LINE 80B STATEMENT 11

NAME OF ORGANIZATION	EXEMPT	NONEXEMPT
PHI KAPPA TAU FRATERNITY	X	
PHI KAPPA TAU PROPERTIES	X	

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS PART III, LINE 4 STATEMENT 12

SCHOLARSHIPS GRANTED BY PHI KAPPA TAU FOUNDATION ARE INTENDED FOR STUDENTS ENTERING THE NEXT ACADEMIC YEAR AS A JUNIOR, SENIOR, OR GRADUATE STUDENT. APPLICANTS ARE CONSIDERED ON THE FOLLOWING CRITERIA: SCHOLASTIC ACHIEVEMENT, CHAPTER SERVICE, CAMPUS ACTIVITIES AND HONORS, LEADERSHIP, CHARACTER, AND COMMUNITY ACTIVITIES AND HONORS. ADDITIONALLY, EMERGENCY EDUCATIONAL GRANTS ARE AWARDED TO STUDENTS WHO DEMONSTRATE FINANCIAL NEED THAT THREATENS THE CONTINUANCE OF THE EDUCATIONAL PROCESS.

The Phi Kappa Tau Foundation
 List of Officers, Directors Trustees and Key Employees
 6/30/2001
 J:\Tax\PHI791\01\Foundation\01wkp.xls\Index

NAME ADDRESS	TITLE	AVG HRS PER WEEK	COMPENSATION	EMPLOYEE BENEFIT CONTRIBUTIONS	EXPENSE ACCOUNT
*Robert G Aldridge 5420 79th Place N E Marysville, Washington 98270	Trustee	Part-Time	0	0	0
*John L (Jack) Bartholomew & Advertising Graphics 3006 Forest Hill Dr Columbus, Ohio 43221	Trustee	Part-Time	0	0	0
Raymond A Bichimer Means, Bichimer, Burkholder & Baker, Co LPA 2006 Kenny Rd Columbus, Ohio 43221-3502	Counsel	Part-Time	0	0	0
C M (Casey) Bntt 210 Magnolia Road Maitland, FL 32751	Trustee	Part-Time	0	0	0
Norman W Brown 540 Camino Rancheros Santa Fe, NM 87501-2871	President/CEO	Part-Time	0	0	0
Gerald Carlton 24 Lakeside Park Dallas, TX 75225	Secretary	Part-Time	0	0	0
Ray A Clarke 4 Timbersong Road Weaverville NC 28787	Trustee	Part-Time	0	0	0
John F Cosgrove, Esq 201 W Flagler Street Miami, Florida 33130	Trustee	Part-Time	0	0	0
Thomas C Cunningham 3740 Pallos Verdas Dallas, Texas 75229	Vice-President	Part-Time	0	0	0
Mel Dettra 727 Winding Way Akron, Ohio 44313-8123	Trustee	Part-Time	0	0	0
C Brent Devore 111 N West Street Westerville, Ohio 43081	Trustee	Part-Time	0	0	0
*F Frednck Father 522 N Main Bowling Green, Ohio 43402	Trustee	Part-Time	0	0	0
*Lawrence L Fisher 495 Tucker Drive Worthington, Ohio 43085	Trustee	Part-Time	0	0	0
*Hugh C Fowler 5945 N Mansfield, #251 Denver, CO 80235	Trustee	Part-Time	0	0	0
John D Good 4850 Dockside Drive #102 Ft Myers, FL 33919	Trustee	Part-Time	0	0	0

NAME ADDRESS	TITLE	AVG HRS PER WEEK	COMPENSATION	EMPLOYEE BENEFIT CONTRIBUTIONS	EXPENSE ACCOUNT
John M Green 3897 Indian Ridge Woods Oxford, Ohio 45056	Trustee	Part-Time	0	0	0
James S Hamilton Federated Securities Corp Federated investors Tower 1001 Liberty Ave Pittsburgh, PA 15222-3779	Trustee	Part-Time	0	0	0
C Richardo Hamilton Hamilton Centre 3200 Crain Hwy Ste 100 Waldorf, MD 20603	Trustee	Part-Time	0	0	0
Jim K Heilmeier 1775 Brookwood Akron, Ohio 44313-5057	Trustee	Part-Time	0	0	0
T E Hendricks 9112 Coral Cove Drive Dallas, TX 75243	Member-at-Large	Part-Time	0	0	0
*Theodore (Ted) A Hendricks 56 Wedgewood Drive Ithaca, NY 14850	Trustee	Part-Time	0	0	0
Greg D Hollen 12236 Snow White Drive Dallas, Texas 75244	Trustee	Part-Time	0	0	0
*Dan L Huffer 2 Westshell Ct Savannah, GA 31411-2950	Trustee	Part-Time	0	0	0
William D Jenkins 5221 Morning Sun Road Oxford, Ohio 45056	Executive Vice President	40	94,250	9,603	3 600
David Lawrence 210 E Pearson Unit 9C Chicago, IL 60611-2363	Trustee	Part-Time	0	0	0
Robert Leatherman 1551 Lanmer St Suite 3105 Denver, CO 80209	Trustee	Part-Time	0	0	0
David Lawrence Phoenix Farm Salem Road SW Rochester, MN 55902-6655	Trustee	Part-Time	0	0	0
Robert Leatherman 1551 Lanmer St Ste 3105 Denver, CO 80209	Trustee	Part-Time	0	0	0
*Edward A Marye, Jr E A Marye Jr , Law Office 50 Broadway Mt Sterling, KY 40353	Trustee	Part-Time	0	0	0

NAME ADDRESS	TITLE	AVG HRS PER WEEK	COMPENSATION	EMPLOYEE BENEFIT CONTRIBUTIONS	EXPENSE ACCOUNT
James C McAtee 3206 BoJeremy Street Orlando, Florida 32822	Trustee	Part-Time	0	0	0
F L McKinley 3206 BoJeremy Street Orlando, FL 32822	Trustee	Part-Time	0	0	0
Todd Napier Oxford, OH 45056	Trustee	Part-Time	0	0	0
Fr Nicholas Rachford 1730 A Carlton Road Parma, Ohio 44134	Trustee	Part-Time	0	0	0
Ross E Roeder 1355 Snell Isle Blvd , N E Suite 203 St Petersburg, FL 33704	Trustee	Part-Time	0	0	0
Joel S Rudy P O Box 30 Oxford, Ohio 45056	Trustee	Part-Time	0	0	0
*Harold H Short 1001 8th Street Boulder, CO 80302	Trustee	Part-Time	0	0	0
Donald E Snyder 14 Hidden Springs Dr Pittsford, NY 14534-2897	Treasurer	Part-Time	0	0	0
Scott Stewart Box 83289 Lincoln, NE 68501	Trustee	Part-Time	0	0	0
*Robert F Tenhover 1201 Edgecliff Place Cincinnati, Ohio 45206	Trustee	Part-Time	0	0	0
*Carl D Vance 494 White Oak Drive Oxford, Ohio 45056	Trustee	Part-Time	0	0	0
*Graydon Webb 4815 Stonehaven Drive Columbus, Ohio 43220	Trustee	Part-Time	0	0	0
Rodney E Wilmoth Hennepin Ave United Methodist Church 511 Groveland Ave Minneapolis, MN 55403	Trustee	Part-Time	0	0	0
Bethany Deines 5221 Morning Sun Rd Oxford, OH 45056	Director of Development	40	44 310	4,318	1,000
	TOTAL		<u>138,560</u>	<u>13,921</u>	<u>4,600</u>

*NOTE-DISTINGUISHED TRUSTEE (NON-VOTING)

PHI KAPPA TAU FOUNDATION
 Grants and Allocations
 Part II, Line 22
 6/30/01

First Name	Last Name	University	Description	Amount
Craig	Laubrich	University of Arizona	Educational Emergency Grant	\$ 1,000 00
Justin	Jennings	Auburn University	Educational Emergency Grant	\$ 1,000 00
Joshua	Thompson	Auburn University	Educational Emergency Grant	\$ 1,000 00
Jeremy	Polf	Oklahoma State University	Educational Emergency Grant	\$ 995 00
Tom	Slama	Cal Poly-Pomona	Educational Emergency Grant	\$ 1,000 00
Katherine	Sermersheim	Southern Illinois University	Interfraternity Educational Fellowship	\$ 5,000 00
VaShaun	Harper	Indiana University	Interfraternity Educational Fellowship	\$ 5,000 00
William	Nelson	Iowa State University	Interfraternity Educational Fellowship	\$ 5,000 00
Jamie	Johnson	Bradley	Hole In The Wall Gang Stipend	\$ 1,000 00
Mark	Doyle	Rensselaer	Hole In The Wall Gang Stipend	\$ 1,000 00
Kevin	McCaffrey	Truman State	Hole In The Wall Gang Stipend	\$ 1,000 00
Grant	Spomy	Franklin & Marshall	Hole In The Wall Gang Stipend	\$ 1,000 00
Brian	Stevens	Bethany	Hole In The Wall Gang Stipend	\$ 1,000 00
Mike	Altenburger	Wright State	Hole In The Wall Gang Stipend	\$ 1,000 00
C Scott	Byington	Miam	Hole In The Wall Gang Stipend	\$ 1,000 00
Geoffrey	Frick	Wright State	Hole In The Wall Gang Stipend	\$ 1,000 00
Frank	Hartley	Georgia	Hole In The Wall Gang Stipend	\$ 1,000 00
Jose	Loya	Idaho	Hole In The Wall Gang Stipend	\$ 1,000 00
Mike	Mavros	Miam	Hole In The Wall Gang Stipend	\$ 1,000 00
Jason	Pierami	Miam	Hole In The Wall Gang Stipend	\$ 1,000 00
Roi	Place	Miam	Hole In The Wall Gang Stipend	\$ 1,000 00
Billy	Brinck	Georgetown	UIFI	\$ 3,480 00
Clinton	Butts	Evansville	UIFI	\$ 3,480 00
Eric	Goetz	Kent State	UIFI	\$ 3,480 00
John	Nastelli	Longwood	UIFI	\$ 3,480 00
Edward	Rauen	Cincinnati	UIFI	\$ 3,480 00
Ryan	Shamus	Florida	UIFI	\$ 3,480 00
Shaun	Walters	Evansville	UIFI	\$ 3,480 00
Matthew	Wright	Evansville	UIFI	\$ 3,480 00
Todd	Haydock	Bowling Green	Pauline Bertsch Memorial Scholarship	\$ 500 00
Hole In The Wall Gang Camp, Connecticut			Grant	\$ 7,200 00
Double H Hole In The Woods Ranch, New York			Grant	\$ 7,200 00
Boggy Creek Gang Camp, Florida			Grant	\$ 7,200 00
Painted Turtle Camp, California			Grant	\$ 7,200 00
AFA Donation			Scholarship	\$ 500 00
Western Michigan University			Scholarship	\$ 250 00
National Interfraternity Foundation			Grant	\$ 1,000 00
National Interfraternity Foundation			Grant	\$ 2,500 00
Donald	Boyer	Case Western Reserve	Paul A Eifers Omega Schlarship	\$ 2,250 00
Nathan	Elkins	Evansville	Paul A Eifers Omega Schlarship	\$ 2,250 00
Jeff	Gander	College of NJ	Paul A Eifers Omega Schlarship	\$ 2,250 00
Scott	Layden	Indiana Univ of PA	Paul A Eifers Omega Schlarship	\$ 2,250 00
Brian	Lemasters	Bethany	Paul A Eifers Omega Schlarship	\$ 2,250 00
Jose	Loya	Idaho	Paul A Eifers Omega Schlarship	\$ 2,250 00
Daniel	Caruso	College of NJ	Named Scholarship	\$ 1,250 00
John	Ciarlarello	Akron	Named Scholarship	\$ 1,250 00
Deepan	Chatterjee	Bethany	Named Scholarship	\$ 1,250 00
Benjamin	Eitz	Penn State	Named Scholarship	\$ 1,250 00
John	Joyce	Bethany	Named Scholarship	\$ 1,250 00
Steven	Ritchie	North Carolina State	Named Scholarship	\$ 1,250 00
Ryan	Stallworth	North Carolina State	Named Scholarship	\$ 1,250 00
J Christopher	Webster	Florida	Named Scholarship	\$ 1,250 00
Byars	Wells	Transylvania	Named Scholarship	\$ 1,250 00
Wesley	Fugate	Centre College	Memorial Scholarship	\$ 1,000 00
Kyle	Branson	Truman State	Parents Fund Scholarship	\$ 1,000 00
Kyle	Brothers	Centre	Parents Fund Scholarship	\$ 1,000 00

First Name	Last Name	University	Description	Amount
John	Brumit	Auburn	Parents Fund Scholarship	\$ 1,000 00
John	Fortuno	Eastern Kentucky	Parents Fund Scholarship	\$ 1,000 00
Leslie	Fugate	Centre	Parents Fund Scholarship	\$ 1,000 00
Jordan	Hoot	Case Western Reserve	Parents Fund Scholarship	\$ 1,000 00
Tim	Majors	Transylvania	Parents Fund Scholarship	\$ 1,000 00
Jed	Miller	Oklahoma State	Parents Fund Scholarship	\$ 1,000 00
Patrick	Noltemeyer	Centre	Parents Fund Scholarship	\$ 1,000 00
Corey	Pate	Kent State	Parents Fund Scholarship	\$ 1,000 00
Stuart	Schott	Florida	Parents Fund Scholarship	\$ 1,000 00
Ryan	Shamus	Florida	Parents Fund Scholarship	\$ 1,000 00
Edward	Wynn	Georgia	Parents Fund Scholarship	\$ 1,000 00
Shahab	Akvan	Florida	Foundation Scholarship	\$ 1,000 00
Casey	Callan	Georgia	Foundation Scholarship	\$ 1,000 00
Kyle	Cotner	Arizona	Foundation Scholarship	\$ 1,000 00
Lewis	Dolezal	Baldwin-Wallace	Foundation Scholarship	\$ 1,000 00
Michael	Ford	Florida	Foundation Scholarship	\$ 1,000 00
James	Goodge	Indiana Univ of PA	Foundation Scholarship	\$ 1,000 00
Andrew	Greenwell	Transylvania	Foundation Scholarship	\$ 1,000 00
James	Hildebrand	North Carolina State	Foundation Scholarship	\$ 1,000 00
Stephen	Kohn	Bradley	Foundation Scholarship	\$ 1,000 00
Robert	Landi	Bradley	Foundation Scholarship	\$ 1,000 00
Gregory	Laubisch	RIT	Foundation Scholarship	\$ 1,000 00
Adam	Love	Washington State	Foundation Scholarship	\$ 1,000 00
Ben	McLaughlin	Case Western Reserve	Foundation Scholarship	\$ 1,000 00
Jared	Piland	North Carolina State	Foundation Scholarship	\$ 1,000 00
Jeremy	Polf	Oklahoma State	Foundation Scholarship	\$ 1,000 00
Jason	Robinson	Akron	Foundation Scholarship	\$ 1,000 00
Danny	Trieff	Mount Union	Foundation Scholarship	\$ 1,000 00
Matthew	Varacalla	Indiana Univ of PA	Foundation Scholarship	\$ 1,000 00
Henry	Ward	North Carolina State	Foundation Scholarship	\$ 1,000 00
Erick	Zimmer	Mount Union	Foundation Scholarship	\$ 1,000 00
PKT Fraternity			Educational Grant	\$ 320,271 00
Scholarship Promotions				\$ 25,930 00
			Total	<u>\$ 499,336 00</u>