

Return of Organization Exempt From Income Tax

2005

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2005 calendar year, or tax year beginning Jul 1, 2005, and ending Jun 30, 2006

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: PHI KAPPA TAU FOUNDATION. D Employer Identification Number: 31-6024975. E Telephone number: (513) 523-1778. F Accounting method: Accrual.

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

H and I are not applicable to section 527 organizations

H (a) Is this a group return for affiliates? Yes No

H (b) If 'Yes,' enter number of affiliates

H (c) Are all affiliates included? Yes No

H (d) Is this a separate return filed by an organization covered by a group ruling? Yes No

G Web site: N/A

J Organization type: 501(c) 3

K Check here if the organization's gross receipts are normally not more than \$25,000

I Group Exemption Number: N/A

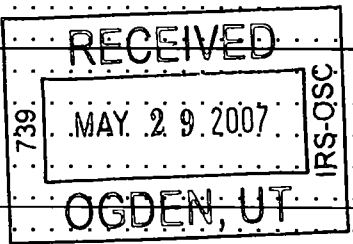
M Check if the organization is not required to attach Schedule B

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12: 1,457,317

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

Table with 21 rows and 4 columns: Description, Sub-row, Amount, Total. Includes lines 1-21 for revenue, expenses, and net assets.

SCANNED JUL 02 2007



Handwritten marks: 119, 12

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 (att sch) (cash \$ <u>419,539.</u> non-cash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/> . . .	22	419,539.	419,539.		
23 Specific assistance to individuals (att sch)	23				
24 Benefits paid to or for members (att sch)	24				
25 Compensation of officers, directors, etc	25	123,388.	0.	75,217.	48,171.
26 Other salaries and wages.	26	172,344.	66,007.	64,073.	42,264.
27 Pension plan contributions	27	7,724.	1,724.	3,638.	2,362.
28 Other employee benefits	28	20,275.	4,526.	9,549.	6,200.
29 Payroll taxes	29	26,055.	5,815.	12,272.	7,968.
30 Professional fundraising fees	30	0.	0.	0.	0.
31 Accounting fees	31	29,059.	0.	29,059.	0.
32 Legal fees	32	1,300.	0.	1,300.	0.
33 Supplies	33	17,903.	7,943.	2,926.	7,034.
34 Telephone	34	16,152.	0.	15,819.	333.
35 Postage and shipping.	35	61,277.	48,000.	4,036.	9,241.
36 Occupancy	36	26,529.	0.	26,529.	0.
37 Equipment rental and maintenance	37	12,683.	0.	12,683.	0.
38 Printing and publications	38	161,463.	108,629.	1,257.	51,577.
39 Travel	39	18,929.	7,594.	931.	10,404.
40 Conferences, conventions, and meetings.	40	22,465.	8,001.	14,345.	119.
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule)	42	53,649.	0.	53,649.	0.
43 Other expenses not covered above (itemize):					
a COMPUTER SUPPORT	43a	3,473.	0.	3,473.	0.
b BOLES ADMINISTRATIVE FEES	43b	37,052.	0.	37,052.	0.
c OTHER PROFESSIONAL FEES	43c	14,623.	7,000.	7,298.	325.
d INSURANCE	43d	18,493.	0.	11,812.	6,681.
e BAD DEBT EXPENSE	43e	137,758.	0.	0.	137,758.
f EDUCATIONAL EXPENSES/SUPPLIES	43f	28,380.	28,380.	0.	0.
g MISC.	43g	14,392.	222.	14,170.	0.
44 Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44	1,444,905.	713,380.	401,088.	330,437.

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If 'Yes,' enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____; (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

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.

What is the organization's primary exempt purpose? ▶ TO SUPPORT THE EDUCATIONAL UNDERTAKINGS OF PHI KAPPA TAU FRATERNITY AND ITS CHAPTERS.

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.)

Program Service Expenses
(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others.)

<p>a <u>FRATERNITY EDUCATIONAL SUPPORT - PROVIDES SUPPORT FOR VARIOUS EDUCATIONAL PROGRAMS OF THE FRATERNITY.</u></p> <p>(Grants and allocations \$ <u>248,766.</u>) If this amount includes foreign grants, check here. ▶ <input type="checkbox"/></p>	<p>542,607.</p>
<p>b <u>SCHOLARSHIPS - PROVIDES FUNDS FOR SCHOLARSHIPS AND FINANCIAL ASSISTANCE TO PHI KAPPA TAU COLLEGIATES AND ALUMNAE. THIS PROGRAM SERVED MORE THAN 50 PEOPLE.</u></p> <p>(Grants and allocations \$ <u>34,271.</u>) If this amount includes foreign grants, check here. ▶ <input type="checkbox"/></p>	<p>34,271.</p>
<p>c <u>GRANTS TO CAMPS SERVING CHILDREN WITH CANCER AND OTHER LIFE-THREATENING ILLNESSES.</u></p> <p>(Grants and allocations \$ <u>91,930.</u>) If this amount includes foreign grants, check here. ▶ <input type="checkbox"/></p>	<p>91,930.</p>
<p>d <u>GRANT IN HONOR OF MIAMI UNIVERSITY TO RENOVATE A CAMPUS MEMORIAL OF PHI KAPPA TAU.</u></p> <p>(Grants and allocations \$ <u>44,572.</u>) If this amount includes foreign grants, check here. ▶ <input type="checkbox"/></p>	<p>44,572.</p>
<p>e Other program services.</p> <p>(Grants and allocations \$ _____) If this amount includes foreign grants, check here. ▶ <input type="checkbox"/></p>	<p></p>
<p>f Total of Program Service Expenses (should equal line 44, column (B), Program services) ▶</p>	<p>713,380.</p>

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Form 990 (2005)

Part IV Balance Sheets (See Instructions)

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	445,806.	45	0.
	46 Savings and temporary cash investments	978,774.	46	424,997.
	47 a Accounts receivable	47 a		
	b Less: allowance for doubtful accounts	47 b		47 c
	48 a Pledges receivable	48 a 452,986.		
	b Less: allowance for doubtful accounts	48 b 31,952.	584,532.	48 c 421,034.
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51 a Other notes & loans receivable (attach sch)	51 a		
	b Less: allowance for doubtful accounts	51 b		51 c
	52 Inventories for sale or use	55,000.	52	55,000.
	53 Prepaid expenses and deferred charges	4,600.	53	5,874.
	54 Investments — securities (attach schedule) . . L-54 Stmt <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	2,835,785.	54	3,412,898.
	55 a Investments — land, buildings, & equipment basis	55 a		
	b Less: accumulated depreciation (attach schedule)	55 b		55 c
	56 Investments — other (attach schedule) L-56 Stmt	4,061,136.	56	4,480,531.
	57 a Land, buildings, and equipment: basis	57 a 1,666,720.		
	b Less: accumulated depreciation (attach schedule)	57 b 409,690.	901,970.	57 c 1,257,030.
	58 Other assets (describe ▶ See Line 58 Stmt)	0.	58	50,130.
59 Total assets (must equal line 74). Add lines 45 through 58	9,867,603.	59	10,107,494.	
LIABILITIES	60 Accounts payable and accrued expenses	101,958.	60	60,530.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64 a Tax-exempt bond liabilities (attach schedule)		64 a	
	b Mortgages and other notes payable (attach schedule)		64 b	
	65 Other liabilities (describe ▶ DUE TO PHI KAPPA TAU FRATERNITY)	0.	65	82,421.
66 Total liabilities. Add lines 60 through 65	101,958.	66	142,951.	
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	1,075,849.	67	3,346,699.
	68 Temporarily restricted	3,572,016.	68	1,514,840.
	69 Permanently restricted	5,117,780.	69	5,103,004.
	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; column (B) must equal line 21)	9,765,645.	73	9,964,543.	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	9,867,603.	74	10,107,494.	

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Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions.)

a	Total revenue, gains, and other support per audited financial statements	a	1,648,406.
b	Amounts included on line a but not on Part I, line 12:		
	1 Net unrealized gains on investments	b1	170,367.
	2 Donated services and use of facilities	b2	
	3 Recoveries of prior year grants	b3	
	4 Other (specify): SEE ATTACHED SCHEDULE	b4	23,134.
	Add lines b1 through b4	b	193,501.
c	Subtract line b from line a	c	1,454,905.
d	Amounts included on Part I, line 12, but not on line a :		
	1 Investment expenses not included on Part I, line 6b.	d1	
	2 Other (specify):	d2	
	Add lines d1 and d2	d	
e	Total revenue (Part I, line 12). Add lines c and d	e	1,454,905.

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements.	a	1,465,216.
b	Amounts included on line a but not on Part I, line 17:		
	1 Donated services and use of facilities	b1	
	2 Prior year adjustments reported on Part I, line 20	b2	
	3 Losses reported on Part I, line 20.	b3	
	4 Other (specify): EXPENSES RELATED TO RENTAL INCOME 2,412 REIMBURSEMENT OF OPERATING EXP. 17,899	b4	20,311.
	Add lines b1 through b4	b	20,311.
c	Subtract line b from line a	c	1,444,905.
d	Amounts included on Part I, line 17, but not on line a :		
	1 Investment expenses not included on Part I, line 6b.	d1	
	2 Other (specify):	d2	
	Add lines d1 and d2	d	
e	Total expenses (Part I, line 17). Add lines c and d	e	1,444,905.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans and deferred compensation plans	(E) Expense account and other allowances
SEE ATTACHED SCHEDULE		123,388.	8,271.	0.

Part VI Other Information (continued)		Yes	No
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?	82 a	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 in Part III.)		82 b	
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?	83 a	X	
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83 b	X	
84 a Did the organization solicit any contributions or gifts that were not tax deductible?	84 a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		84 b	
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85 a	N/A	
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85 b	N/A	
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.			
c Dues, assessments, and similar amounts from members	85 c		
d Section 162(e) lobbying and political expenditures	85 d		
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices.	85 e		
f Taxable amount of lobbying and political expenditures (line 85d less 85e).	85 f		
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85 g	N/A	
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85 h	N/A	
86 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86 a	N/A	
b Gross receipts, included on line 12, for public use of club facilities	86 b	N/A	
87 501(c)(12) organizations. Enter: a Gross income from members or shareholders.	87 a	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.)	87 b	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 ▶ 0 , section 4912 ▶ 0 ; section 4955 ▶ 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.	89 b		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 ▶ NONE			
b Number of employees employed in the pay period that includes March 12, 2005 (See instructions)	90 b		6
91 a The books are in care of ▶ LISA ADAMS Telephone number ▶ (513) 523-1778			
Located at ▶ 5221 MORNING SUN ROAD, OXFORD, OH ZIP + 4 ▶ 45056			
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)?	91 b		X
If 'Yes,' enter the name of the foreign country. ▶			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Statements			
c At any time during the calendar year, did the organization maintain an office outside of the United States?	91 c		X
If 'Yes,' enter the name of the foreign country. ▶			
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 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 ▶		92	

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: 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) Exclusion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings & temporary cash invmnts			14	527.	
96 Dividends & interest from securities			14	132,528.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			16	10,448.	
98 Net rental income or (loss) from pers prop					
99 Other investment income			14	49,056.	
100 Gain or (loss) from sales of assets other than inventory			18	312,286.	
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))				504,845.	
105 Total (add line 104, columns (B), (D), and (E))					504,845.

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 (See the instructions.)

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)
▼	N/A

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(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
	0			
	0			
	0			
	0			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

- 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

Note: If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions).

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.

Please Sign Here:
 Signature of officer: *[Signature]* Date: *May 14, 2007*
 Type or print name and title: *Carl Steven Hartman, CEO*

Paid Preparer's Use Only:
 Preparer's signature: *Brian T. Hardy* Date: *5/12/07* Check if self-employed: Preparer's SSN or PTIN (See General Instruction W): _____
 Firm's name (or yours if self-employed): *Medwig & Co.*
 address, and ZIP + 4: *401 Wood Street, Suite 1000 Pittsburgh PA 15222* EIN: _____ Phone no: *(412) 562-9061*

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under
Section 501(c)(3)

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

Supplementary Information — (See separate instructions.)

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

OMB No 1545-0047

2005

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 and deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000 ▶		None		

Part II – A 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
NONE		
Total number of others receiving over \$50,000 for professional services ▶		None

Part II – B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter 'None.' See instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services ▶		None

Part III Statements About Activities (See instructions.)

Table with 3 columns: Question, Yes, No. Contains questions 1 through 4b regarding lobbying activities, property transactions, and grants.

Part IV Reason for Non-Private Foundation Status (See 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)
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 [X] 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) Check the box that describes the type of supporting organization Type 1 Type 2 Type 3

Provide the following information about the supported organizations. (See instructions)

Table with 2 columns: (a) Name(s) of supported organization(s), (b) Line number from above. Contains 3 empty rows for data entry.

14 An organization organized and operated to test for public safety. Section 509(a)(4). (See 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) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	785,694.	615,044.	65,989.	649,618.	2,116,345.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc. purpose	0.	7,946.	4,740.	5,767.	18,453.
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	369,625.	382,710.	440,385.	528,715.	1,721,435.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's 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	1,155,319.	1,005,700.	511,114.	1,184,100.	3,856,233.
24 Line 23 minus line 17	1,155,319.	997,754.	506,374.	1,178,333.	3,837,780.
25 Enter 1% of line 23	11,553.	10,057.	5,111.	11,841.	

26 Organizations described on lines 10 or 11:	a Enter 2% of amount in column (e), line 24	26a	76,756.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts		26b	52,383.
c Total support for section 509(a)(1) test Enter line 24, column (e)		26c	3,837,780.
d Add: Amounts from column (e) for lines	18 1,721,435. 19	26d	1,773,818.
	22 52,383. 26b	26e	2,063,962.
e Public support (line 26c minus line 26d total)		26f	53.78 %
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))			

27 Organizations described on line 12:

a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person.' Do not file this list with your return. Enter the sum of such amounts for each year:

(2004) _____ (2003) _____ (2002) _____ (2001) _____

b For any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records 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 11b, as well as individuals.) Do not file this list with your return. 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:

(2004) _____ (2003) _____ (2002) _____ (2001) _____

c Add Amounts from column (e) for lines	15 _____ 16 _____	27c	
	17 _____ 20 _____ 21 _____	27d	
d Add. Line 27a total _____ and line 27b total _____		27e	
e Public support (line 27c total minus line 27d total)		27f	
f Total support for section 509(a)(2) test Enter amount from line 23, column (e)		27g	%
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))		27h	%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))			

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

Part V Private School Questionnaire (See instructions.)
 (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.) ----- ----- -----		
34a	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 (See instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

N/A

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked 'a' and 'limited control' provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term 'expenditures' means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39).	40	
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	41	
42	Grassroots nontaxable amount (enter 25% of line 41).	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	
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.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45	Lobbying nontaxable amount				
46	Lobbying ceiling amount (150% of line 45(e))				
47	Total lobbying expenditures				
48	Grassroots non-taxable amount				
49	Grassroots ceiling amount (150% of line 48(e))				
50	Grassroots lobbying expenditures				

Part VI-B Lobbying Activity by Nonelecting Public Charities
 (For reporting only by organizations that did not complete Part VI-A) (See instructions)

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.)			

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

**PHI KAPPA TAU FOUNDATION
MEMBER GIFT REPORT
DONORS WITH CUMULATIVE TOTAL \$5000 AND OVER - FY06**

31-6024975

Part I Contributors (See Specific Instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>		32,630.00	PERSON
<u>2</u>		5,518.50	PERSON
<u>3</u>		42,267.00	PERSON
<u>4</u>		5,000.00	PERSON
<u>5</u>		25,000.00	PERSON
<u>6</u>		5,000.00	PERSON
<u>7</u>		5,000.00	PERSON
<u>8</u>		8,700.00	PERSON
<u>9</u>		10,000.00	PERSON
<u>10</u>		5,000.00	PERSON
<u>11</u>		8,327.40	PERSON

PHI KAPPA TAU FOUNDATION
MEMBER GIFT REPORT
DONORS WITH CUMULATIVE TOTAL \$5000 AND OVER - FY06

31-6024975

Part I Contributors (See Specific Instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>12</u>		11,059.00	PERSON
<u>13</u>		5,225.00	PERSON
<u>14</u>		5,000.00	PERSON
<u>15</u>		7,082.22	PERSON
<u>16</u>		20,000.00	PERSON
<u>17</u>		10,000.00	PERSON
<u>18</u>		25,000.00	PERSON
<u>19</u>		27,091.23	PERSON
<u>20</u>		5,000.00	PERSON
<u>21</u>		11,000.00	PERSON
<u>22</u>		50,150.00	PERSON
<u>23</u>		5,000.00	PERSON
<u>24</u>		13,000.00	PERSON

**PHI KAPPA TAU FOUNDATION
MEMBER GIFT REPORT
DONORS WITH CUMULATIVE TOTAL \$5000 AND OVER - FY06**

31-6024975

Part I Contributors (See Specific Instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>25</u>		20,300.00	PERSON
<u>26</u>		7,510	PERSON
<u>27</u>		10,000.00	PERSON
<u>28</u>		9,987.65	PERSON
<u>29</u>		6,200.00	PERSON
<u>30</u>		8,048.22	PERSON
<u>31</u>		10,994.96	PERSON
<u>32</u>		10,653.00	PERSON
<u>33</u>		11,781.16	PERSON
<u>34</u>		9,750.00	PERSON
<u>35</u>		5,000.00	PERSON

Phi Kappa Tau Foundation, Inc.
July 2005 through June 2006

31-6024975
2005

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION	STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SCOTT NASS 3770 KEYSTONE AVENUE APARTMENT 410 LOS ANGELES, CA 90034-6362	NONE		SCHOLARSHIP	2,250
BRIAN FRIEDMAN 35 WINTERGREEN DR EASTON, CT 06612	NONE		SCHOLARSHIP	2,250
CRISTOS INFANTIDES 2134 NW 15TH AVE GAINESVILLE, FL 32605-5216	NONE		SCHOLARSHIP	2,250
STEVEN RITCHIE 202 BEAUREGARD ST. STANLEY, NC 28164	NONE		SCHOLARSHIP	2,250
MATTHEW STEINFELD 5850 CAMERON RUN APT. 1614 ALEXANDRIA, VA 22303	NONE		SCHOLARSHIP	2,250
SHAUN WALKER 3912 ACADEMY DR METAIRIE, LA 70003	NONE		SCHOLARSHIP	2,250
NICHOLAS BARTLEY 2502 HILLSDALE FOREST RD SUMMERFIELD, NC 27358-9324	NONE		SCHOLARSHIP	1,000
MICHAEL RENNER 105 SHEFFIELD CT CHALFONT, PA 18914	NONE		SCHOLARSHIP	1,000
JOSEPH HENDERSON 48 MERWIN ST WHEELING, WV 26003	NONE		SCHOLARSHIP	1,000
ADAM DEMPSEY 766 MARINE DR DIXON, IL 61021	NONE		SCHOLARSHIP	1,000
LEE DOSSETT 848 JANET DRIVE COLUMBUS, OH 43224	NONE		SCHOLARSHIP	1,000
RYAN MICKELS 18 GROVER ST WALNUT CREEK, CA 94596	NONE		SCHOLARSHIP	1,000
DAVID GRIFFIN 3710 NE KIMBAL RD TOPEKA, KS 66617	NONE		SCHOLARSHIP	1,000
TYLER DALL 517 E DOUGLAS, APT. 233 WICHITA, KS 67202	NONE		SCHOLARSHIP	1,000
JED MILLER 32831 TITUS HILL LN AVON LAKE, OH 44012-2369	NONE		SCHOLARSHIP	1,000
NICK ZAPPITELLI 128 COVERED BRIDGE DR OCOOEE, FL 34761	NONE		SCHOLARSHIP	1,000
BRADFORD LOVE 1548A SPARTAN VILLAGE EAST LANSING, MI 48823	NONE		SCHOLARSHIP	1,000
ROSS TEGELER P.O BOX 163 326 1ST ST MEADOW GROVE, NE 68752	NONE		SCHOLARSHIP	1,000

Phi Kappa Tau Foundation, Inc.
July 2005 through June 2006

31-6024975
2005

RECIPIENT NAME AND ADDRESS	RELATONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION	STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ASSOCIATION OF HOLE IN THE WALL CAMPS ONE CENTURY TOWER 265 CHURCH ST, SUITE 503 NEW HAVEN, CT 06510	NONE		SCHOLARSHIP	91,930

Phi Kappa Tau Foundation, Inc.
July 2005 through June 2006

31-6024975
2005

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	FOUNDATION	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HOLE IN THE WALL STIPEND RECIPIENTS	NONE		SCHOLARSHIP	5,581
JONATHAN M. BERNARD 1590 OAKWOOD TRL XENIA, OH 45385				
EVAN K. BROTHERS 1176 BRUSHUP LN UNION, KY 41091				
REGAN R. FULLER 1667 FORDHAM WAY MOUNTAIN VIEW, CA 94040				
NICHOLAS J. GESUALDI 2235 SOUTH MAIN STREET ANN ARBOR, MI 48103				
ERIK D GRANLUND 6916 W. FARGO AVE. NILES, IL 60714				
ROBERT M HAMILTON 500 OLD VALLEY PT FAYETTEVILLE, GA 30215-6530				
TREVOR A. HUSTED 18607 92ND AVE NE BOTHELL, WA 98011				
EVAN J. KARRS 2315 S OVERLOOK RD CLEVELAND HTS, OH 44106				
STEPHEN M. KIENE 209 N COURT ST SCOTTSVILLE, KY 42164				
ERIC C LOMMEL 17540 COUNTY RD #505 E BIG LAKE, MN 55309				
STEPHEN N. MUCHER 136 S WALNUT ST YELLOW SPRINGS, OH 45387				
SHAWN K. NELSON 379 5TH AVENUE SOUTH ST CLOUD, MN 56301				
CALVIN NG 1560 E 38TH STREET CLEVELAND, OH 44114				
JOSHUA W. POTTER 4777 FIREBROOK BLVD LEXINGTON, KY 40513				
COMRON SAIFI 103 HEAVNER ST LA VALE, MD 21502				
DANIEL A. SCHIFF 7 EARLWOODE DR WHITE PLAINS, NY 10606				
KEITH M SHEA 18590 CLEARY RD ANOKA, MN 55303				
CODY J TYLER 107 SHANAHAN DR BUTLER, PA 16001				
JOSEPH A UVANNI				

Phi Kappa Tau Foundation, Inc.
July 2005 through June 2006

31-6024975
2005

RECIPIENT NAME AND ADDRESS	RELATONSHIP TO SUBSTANTIAL CONTRIBUTOR AND STATUS OF RECIPIENT	FOUNDATION	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
173 PARIS ROAD CALVERT CITY, KY 42029				
JACK W WHEELER 3974 WEST LAKE DR CORTLAND, OH 44410				

Phi Kappa Tau Foundation, Inc.
 July 2005 through June 2006

31-6024975
 2005

RECIPIENT NAME AND ADDRESS	RELATONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION	STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
NORTH AMERICAN INTERFRATERNITY FOUNDATION 1750 ROYALTON DRIVE CARMEL, IN 46032	NONE		SCHOLARSHIP	1,000
THE OXFORD COMMUNITY FOUNDATION 52 PARK PLACE EAST OXFORD, OH 45056	NONE		SCHOLARSHIP	500
PHI KAPPA TAU - DELTA NU OFF. OF GREEK AFFAIRS, 019 STU UNION 3640 COLONEL GLEN HIGHWAY DAYTON, OH 45435	NONE		SCHOLARSHIP	500
PHI KAPPA TAU - DELTA PI 2237 UNIVERSITY STATION MURRAY, KY 42071	NONE		SCHOLARSHIP	500
ASSOC OF FRATERNITY ADVISORS FOUNDATION 9640 N AUGUSTA ST SUITE 433 CARMEL, IN 46032	NONE		SCHOLARSHIP	250
PHI KAPPA TAU - DELTA 600 WEST WALNUT STREET CENTRE COLLEGE DANVILLE, KY 40422-1394	NONE		SCHOLARSHIP	350
MISCELLANEOUS GRANTS PAID MATTHEW BURGESS 1024 WESTGATE PL. LOUISVILLE, KY 40207	NONE		SCHOLARSHIP	90
JEFFREY BRIGGS 11972 WEBSTER RD STRONGSVILLE, OH 44136				
PHI KAPPA TAU FRATERNITY 5221 MORNING SUN ROAD OXFORD, OH 45056	AFFILIATED - EXEMPT ORGANIZATION		EDUCATIONAL GRANTS	248,766
MIAMI UNIVERSITY 501 EAST HIGH STREET OXFORD, OH 45056	NONE		RENOVATION OF MEMORIAL	44,572

TOTAL CONTRIBUTIONS PAID				419,539

Form 990, Page 4, Part IV, Line 54
Investments - Securities Statement

Line 54 – Investments - Securities:	Beginning of Year	End of Year
EQUITY MUTUAL FUNDS	1,960,430.	2,665,964.
FIXED INCOME MUTUAL FUNDS	875,355.	746,934.
Total	<u>2,835,785.</u>	<u>3,412,898.</u>

Form 990, Page 4, Part IV, Line 56
Investments - Other Statement

Line 56 – Investments - Other:	Beginning of Year	End of Year
CASH SURRENDOR VALUE OF LIFE INSURANCE	70,035.	46,324.
BENEFICIAL INTEREST IN PREPETUAL TRUST	3,991,101.	4,434,207.
Total	<u>4,061,136.</u>	<u>4,480,531.</u>

Form 990, Page 4, Part IV, Line 58
Other Assets Statement

Line 58 - Other Assets:	Beginning of Year	End of Year
LIFE INSURANCE PROCEEDS RECEIVABLE	0.	50,130.
Total	<u>0.</u>	<u>50,130.</u>

Explanation Statement

Form/Line: Schedule A, Page 2, Part III Line 3a
 Explanation of: How We Determine Which Recipients Qualify to Receive Payments

THE FOUNDATION PROVIDES SCHOLARSHIPS AND FELLOWSHIPS TO MEMBERS, WHO MUST
SUBMIT APPLICATIONS TO BE CONSIDERED. A COMMITTEE REVIEWS THE
APPLICATION AND SELECTS THE SCHOLARSHIP AND FELLOWSHIP RECIPIENTS.

Supporting Statement of:

Form 990 p 1/Line 20

Description	Amount
PRIOR YEAR AUDIT ADJUSTMENT	15,708.
CHANGE IN CSV OF LIFE INSURANCE	2,823.
UNREALIZED GAIN ON INVESTMENTS	170,367.
Total	<u>188,898.</u>

Supporting Statement of:

Form 990 p 5/Part IV-A, Line b(4)

Description	Amount
EXPENSES RELATED TO RENTAL INCOME	2,412.
REIMBURSEMENT OF OPERATING EXPENSES	17,899.
CHANGE IN CSV OF LIFE INSURANCE	2,823.
Total	<u>23,134.</u>

Phi Kappa Tau Foundation
Accumulated Depreciation Detail
June 30, 2006

31-6024975
2005

	Date Acquired	Dep Method	Cost	Net Book Value 6/30/2005	Depreciation 6/30/2006	Accum Dep 6/30/2006	Net Book Value 6/30/2006
Epson Premier	Sept 91	Macrs 5	\$3,000 00	0 00	0	3,000 00	\$0 00
Star Technologies	May 93	Macrs 5	\$18,008 00	0 00	0	18,008 00	\$0 00
Exec Dir Office Furn	April 94	SL/5	\$3,325 00	0 00	0	3,325 00	\$0 00
C.S&R Mac System	June 96	SL/5	\$13,347 00	0 00	0	13,347 00	\$0 00
Security Dynamics	June 96	SL/5	\$1,127 00	0 00	0	1,127 00	\$0 00
Mac Zone	July 96	SL/5	\$1,738 00	0 00	0	1,738 00	\$0 00
Mac System	1997	SL/5	\$8,604 00	0 00	0	8,604 00	\$0 00
Fax Machine	Sept 97	SL/5	\$2,039 00	0 00	0	2,039 00	\$0 00
HP LJ 551 Mopier	Sept 97	SL/5	\$8,235 00	0 00	0	8,235 00	\$0 00
SUC 10/100 Switched Hub	June 97	SL/5	\$1,210 00	0 00	0	1,210 00	\$0 00
Tech Data-HP LaserJet 551	June 97	SL/5	\$1,300 00	0 00	0	1,300 00	\$0 00
Tech Data-HP LaserJet 551	June 97	SL/5	\$2,600 00	0 00	0	2,600 00	\$0 00
Battery Backup	July 97	SL/5	\$1,930 00	0 00	0	1,930 00	\$0 00
Wright Line-Rack System	Sept 97	SL/5	\$3,019 00	0 00	0	3,019 00	\$0 00
Creative Computer-Pub	August 98	SL/5	\$3,098 88	0 00	0	3,098 88	\$0 00
Robinson Communication-Phone Upgr	Dec 98	SL/5	\$8,690 50	0 00	0	8,690 50	\$0 00
Salem Office Products - Brandon Furn	Dec 98	SL/5	\$20,388 74	0 00	0	20,388 74	\$0 00
DLP - Modem	Jan 99	SL/5	\$2,568 00	0 00	0	2,568 00	\$0 00
DLP - FND Printer	Feb 99	SL/5	\$1,658 00	0 00	0	1,658 00	\$0 00
New Headquarters Building-Furniture	Aug 99	SL/5	\$15,340 52	0 00	0	15,340 52	\$0 00
New Headquarters Building-Furniture	Sept 99	SL/5	\$10,778 00	0 00	0	10,778 00	\$0 00
New Headquarters Building-Furniture	Nov 99	SL/5	\$1,176 00	0 00	0	1,176 00	\$0 00
New Headquarters Building-Furniture	Dec 99	SL/5	\$2,108 86	0 00	0	2,108 86	\$0 00
Micro Center	10/16/00	SL/5	\$2,758 90	160 94	161 00	2,758 96	(\$0 06)
DLP-Antivirus	01/30/01	SL/5	\$1,220 00	142 33	142 00	1,219 67	\$0 33
Salem Office Products - Publications Office	03/30/01	SL/5	\$1,974 00	296 10	296 00	1,973 90	\$0 10
DLP-Antivirus	05/30/01	SL/5	\$12,700 68	2,328 45	2,328 00	12,700 23	\$0 45
DLP-Antivirus	06/12/01	SL/5	\$2,630 00	504 08	504 00	2,629 92	\$0 08
Patriot-Membership Software	07/19/01	SL/5	\$22,138 00	8,855 20	4,428 00	17,710 80	\$4,427 20
Salem Office Products -John's office	08/20/01	SL/5	\$1,924 32	769 73	385 00	1,539 59	\$384 73
New Mac-Pub Office	08/31/01	SL/5	\$1,806 94	720 37	360 00	1,440 57	\$360 37
DLP-Angie's computer	09/21/01	SL/5	\$1,285 00	518 00	259 00	1,036 00	\$259 00
DLP-Diane's & Carol's computer	03/25/02	SL/5	\$2,950 00	1,180 00	590 00	2,360 00	\$590 00
Patriot-Membership Software	08/01/02	SL/5	\$22,138 00	8,855 20	4,428 00	17,710 80	\$4,427 20
New Mac-Pub Office	10/18/02	SL/5	\$1,858 98	743 59	372 00	1,487 39	\$371 59
Dictation software	05/18/03	SL/5	\$703 95	410 64	141 00	434 31	\$269 64
Patriot-Membership Software	08/01/03	SL/5	\$22,138 00	13,282 80	4,428 00	13,283 20	\$8,854 80
Team Lynx - 2 laptops	11/01/03	SL/5	\$2,537 00	1,522 20	507 00	1,521 80	\$1,015 20
Team Lynx - 5 laptops	07/16/04	SL/3	\$7,249 85	6,041 63	2,417 00	3,625 33	\$3,624 63
Team Lynx - server	09/08/04	SL/5	\$6,293 00	5,663 70	1,259 00	1,888 30	\$4,404 70
US Voice & Data - Phone system	12/06/04	SL/10	\$16,238 00	15,426 10	1,824 00	2,435 90	\$13,802 10
Team Lynx - desktops/laptops	03/14/05	SL/3	\$10,830 00	9,025 00	3,610 00	5,415 00	\$5,415 00
Team Lynx - laptop	03/24/05	SL/3	\$1,707 00	1,422 50	569 00	853 50	\$853 50
Intuit - accounting software	08/13/05	SL/3	\$1,409 87	1,174 89	470 00	704 88	\$704 88
Digital Camera	08/15/04	SL/3	\$1,063 94	888 62	355 00	532 32	\$531 62
CIP - Table Refurbishing			\$1,118 25				\$1,118 25
Building and Related Assets			\$1,384,755 00	822,040 00	24,016 00	179,140 00	\$1,205,615 00
TOTAL			1,666,720 38	901,970 07	53,649 00	409,690 06	1,257,030 32

FORM 990, PAR V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
GERALD G. CARLTON, JR. 24 LAKESIDE PARK DALLAS, TX 75225	CHAIRMAN 10	NONE	NONE	NONE
DR. C. BRENT DEVORE 111 N WEST ST WESTERVILLE, OH 43081-1417	VICE CHAIRMAN 5	NONE	NONE	NONE
GREGORY M. HEILMEIER 2633 DEER RIDGE RUN CUYAHOGA FALLS, OH 44223	SECRETARY 5	NONE	NONE	NONE
WILLIAM G. BRAUND CPA 2378 FERGUSON RD ALLISON PARK, PA 15101-3550	TREASURER 10	NONE	NONE	NONE
JOHN M GREEN 3897 INDIAN RIDGE WOODS OXFORD, OH 45056-9481	EXECUTIVE DIRECTOR 50	82,900	3,860	NONE
C. STEVEN HARTMAN 5513 GOLDCREST DRIVE CINCINNATI, OH 45238-3234	CHIEF EXECUTIVE OFFICER 20	40,488	4,411	NONE
CHARLES T BALL 231 S 21ST ST RICHMOND, IN 47374-5733	TRUSTEE 5	NONE	NONE	NONE
WILLIAM CLARY MACAK 1712 OAKVIEW CV NICEVILLE, FL 32578-8727	TRUSTEE 5	NONE	NONE	NONE
GREGORY D HOLLEN 12236 SNOW WHITE DR DALLAS, TX 75244-7355	TRUSTEE 5	NONE	NONE	NONE
DAVID A RUCKMAN 840 W HILL DR GATES MILLS, OH 44040	TRUSTEE 5	NONE	NONE	NONE
ROSS E ROEDER 1663 WATERMARK CIR NE ST PETERSBURG, FL 33702	TRUSTEE 5	NONE	NONE	NONE
JIM K HEILMEIER 1775 BROOKWOOD DR AKRON, OH 44313-5057	TRUSTEE 5	NONE	NONE	NONE
NORMAN W BROWN 540 CAMINO RANCHEROS SANTA FE, NM 87505-2871	TRUSTEE 5	NONE	NONE	NONE
DAVID W LAWRENCE	TRUSTEE	NONE	NONE	NONE

FORM 990, PAR V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
35 MAIN ST NEWCASTLE, ME 04553-3818	5			
DONALD JAMES PHILLIPS, II 1942 N FREMONT CHICAGO, IL 60614-5017	TRUSTEE 5	NONE	NONE	NONE
SCOTT G STEWART BOX 5325 LINCOLN, NE 68505-0325	TRUSTEE 5	NONE	NONE	NONE
DR. RODNEY E. WILMOTH PO BOX 549 RED FEATHER LAKES, CO 80545-0549	TRUSTEE 5	NONE	NONE	NONE
JOEL S RUDY 19 ROXBURY DR ATHENS, OH 45701	TRUSTEE 5	NONE	NONE	NONE
TIMOTHY F. SMITH 18650 NORTH ST POB 221 TONTOGANY, OH 43565-0221	TRUSTEE 5	NONE	NONE	NONE
GRAND TOTALS		123,388	8,271	NONE