Form

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) u Do not enter Social Security numbers on this form as it may be made public.

u Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 2013 Open to Public Inspection

<u>A</u>	For the	e 2013 calendar year, or tax year beginning , and ending			
В	Check if a	applicable: C Name of organization		D Employ	yer identification number
Ш	Address of	thange PANHELLENIC SCHOLARSHIP FOUNDATION			
	Name cha	Doing Business As		36-	4302482
H		Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telepho	one number
닏	Initial retu	17 North Wabash Avenue	6th Fl	312	2-357-0027
Ш	Terminate	d City or town, state or province, country, and ZIP or foreign postal code			
	Amended	return Chicago IL 60602		<b>G</b> Gross rec	eipts\$ <b>285,443</b>
Ħ	Application	F Name and address of principal officer:			
Ш	Арріісаціо	Chris Tomaras	H(a) Is this a gr	roup return for s	subordinates? Yes X No
		17 North Wabash Avenue	H(b) Are all su	bordinates incl	uded? Yes No
		Chicago IL 60602	If "No,	," attach a list.	(see instructions)
$\overline{}$	Tax-exer	npt status: X 501(c)(3) 501(c) ( ) t (insert no.) 4947(a)(1) or 527			
÷	Website:		H(c) Group exe	emption numbe	or <b>11</b>
<u>к</u>			Year of formation: 2		M State of legal domicile: <b>IL</b>
F	Part I	Summary	real of formation.		M State of legal dofficile.
•	T	Drighty describe the argenizations mission or most significant estimation.			
4		To further the education of worthy students of			
nce		Hellenic descent			
Governance		nellelic descell			
Š	_ :				
	2 (	Check this box <b>u</b> if the organization discontinued its operations or disposed of more than 2			7
⋖	3 [	Number of voting members of the governing body (Part VI, line 1a)		3	7
ties		Number of independent voting members of the governing body (Part VI, line 1b)			<u> </u>
Activities		Total number of individuals employed in calendar year 2013 (Part V, line 2a)			0
Ac	6	Total number of volunteers (estimate if necessary)		6	32
		Total unrelated business revenue from Part VIII, column (C), line 12			0
	1 d	Net unrelated business taxable income from Form 990-T, line 34			0
	。/	Contributions and grants (Dort VIII line 4h)	Prior Ye	3,718	Current Year 285,443
ne	"	Contributions and grants (Part VIII, line 1h)	04	3,710	203,443
Revenue	9 1	Program service revenue (Part VIII, line 2g)			
Re	10 1	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)			0
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<i>C</i> 1	2 710	205 442
_		Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,718	285,443
		Grants and similar amounts paid (Part IX, column (A), lines 1–3)	∠5	5,000	20,000
		Benefits paid to or for members (Part IX, column (A), line 4)		0 000	- 0
es	15 3	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		8,893	68,157
penses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		3,000	3,000
Exp		Total fundraising expenses (Part IX, column (D), line 25) u 26,446			
ш	17 (	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		0,869	194,518
		Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		7,762	285,675
. 0		Revenue less expenses. Subtract line 18 from line 12		4,044	-232
Net Assets or	B	5 . I (D ) ( I'	Beginning of Cu		End of Year
Sset	일 20	Total assets (Part X, line 16)		3,506	33,333
et	21	Total liabilities (Part X, line 26)		0,300	20,359
		Net assets or fund balances. Subtract line 21 from line 20		3,206	12,974
_	Part II	Signature Block			
		nalties of perjury, I declare that I have examined this return, including accompanying schedules and statemet, and complete. Declaration of preparer (other than officer) is based on all information of which preparer			owledge and belief, it is
	ue, come	ca, and complete. Declaration of preparer (other than officer) is based on all information of which preparer	rias ariy kriowieu	y <del>c</del> .	
Sig	_	Signature of officer	_	Date	
He	ere	Chris Tomaras Presi	dent		
		Type or print name and title			
		Print/Type preparer's name  Preparer's signature	Date	Check	if PTIN
Pai		Michael D. Burns, CPA Michael D. Burns, CPA	07/27	/14 self-em	ployed <b>P01501625</b>
	eparer	Firm's name } Michael D. Burns	F	Firm's EIN }	
Use	e Only	1509 Clarkson Court			
		Firm's address } Naperville, IL 60139		Phone no.	630-363-5127
Ma	y the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No

_	m 990 (2013) PANHELLENIC SCHOLARSHIP FOUNDATION 36-4302482	Page 2
Pa	Part III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	🔲
1	Briefly describe the organization's mission:	
	To further the education of worthy students of	
	IIollonia doggont	
- 11	nellenic descent	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
•		
3	3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	
	services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
	the total expenses, and revenue, if any, for each program service reported.	
	and total dispersion, and total and, it dispersion to the repersion.	
	(0 + ) (5	``
4a	a (Code: ) (Expenses \$ 149,074 including grants of \$ 20,000 ) (Revenue \$	<u>.</u> )
S	Scholarship awards and communications programs to raise awareness	of the
а	availability of scholarships, the application process, and the cri	iteria by
	-high waginiants and shasan	
•	which recipients are chosen.	
	•	
4b T	b (Code: ) (Expenses \$ 90,619 including grants of \$ ) (Revenue \$ The Hellenic Birthright program provides a unique educational and	cultural
T W e	The Hellenic Birthright program provides a unique educational and experience for Greek American college students with limited finance who have never been to Greece. The study-abroad program allows study-approach the history, culture and everyday life of Greece, while broader their education through aggredited sollege governes.	cial means udents to
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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_		v
_	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			х
7	"Yes," complete Schedule D, Part I  Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			21
٥		8		х
9	complete Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
Ŭ	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			37
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	4.0	v	
	Schedule D, Parts XI and XII	12a	X	
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	406		x
13	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	144		21
J	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	<b>20</b> a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
2	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
3	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
<del>l</del> a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a			X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
ia	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26		Х
	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
;	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		х
_	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
С		200		х
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		х	Λ
)			_ A	
)	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			v
	conservation contributions? If "Yes," complete Schedule M	30		X
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			37
	Part I	31		X
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I			X
ļ	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		X
ia	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
6	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
,	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
3	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	g and the second	38	x	

Form 990 (2013) PANHELLENIC SCHOLARSHIP FOUNDATION 36-4302482

Page 5

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance Check if School Q contains a response or note to any line in this Part	\/				I	$\neg$
	Check if Schedule O contains a response or note to any line in this Part	V			V	I	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0		1,6	23	40
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0				
c	Did the organization comply with backup withholding rules for reportable payments to vendors and						
·	reportable gaming (gambling) winnings to prize winners?			10			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	 I I					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns the second of the control of th	$\overline{}$		2b			
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a			x
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule						==
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other						
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin		-,				
	account)?			4a			X
b	If "Yes," enter the name of the foreign country: <b>u</b>						
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financia	l Accou	nts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa				$\neg$		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?				_		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the						
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution						
	wiften ware not too deductible?			6b	,		
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods					
	and services provided to the payor?	- 		7a			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b			
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was						
	required to file Form 8282?						X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contract	?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri	ract?		7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 889	99 as required?				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file	e a Form 1098-	C? 7h			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting						
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring						
	organization, have excess business holdings at any time during the year?			8	$\perp$		_
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the organization make any taxable distributions under section 4966?			9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	-		
10	Section 501(c)(7) organizations. Enter:		I				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b					
11	Section 501(c)(12) organizations. Enter:	11	ı				
а	Gross income from members or shareholders	11a					
b	Gross income from other sources (Do not net amounts due or paid to other sources						
	against amounts due or received from them.)	11b					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		? 	128	1		
	, , , , , , , , , , , , , , , , , , , ,	12b					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			40	+		
а	Is the organization licensed to issue qualified health plans in more than one state?			138	1		
h	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.						
b	Enter the amount of reserves the organization is required to maintain by the states in which	13b					
	the organization is licensed to issue qualified health plans  Enter the amount of reserves on hand	13c					
с 14а	Enter the amount of reserves on hand	-	l .	148	1		x
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul				_	+	
_~							

Form 990 (2013) PANHELLENIC SCHOLARSHIP FOUNDATION 36-4302482 Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 7 Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? X Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8 The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O ...... X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? X 13 13 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? ..... Section C. Disclosure Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)

17	List the states	with which a	copy of this	Form 990 is	required to be filed <b>u</b>	IJ
----	-----------------	--------------	--------------	-------------	-------------------------------	----

- available for public inspection. Indicate how you made these available. Check all that apply.
  - | X | Own website | Another's website | X | Upon request | Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- State the name, physical address, and telephone number of the person who possesses the books and records of the 20 17 North Wabash Avenue organization: u Chris Tomaras

IL 60602

Chicago

Form 990 (2013) PANHELLENIC SCHOLARSHIP FOUNDATION 36-4302482

Page 7

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) (C) Average hours per week box, unless person is officer and a director				is both	an	(D) Reportable compensation from the	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Chris Tomaras										
	10.00									
Pres & Treasurer	0.00	X		Х				0	0	0
(2) Robert A Buhler										
	5.00									
Director	0.00	X						0	0	0
(3)John Galanis										
	3.00							_	_	_
Director	0.00	X						0	0	0
(4) Athan Sotos										
	2.00							_	_	_
Secretary	0.00	X		Х				0	0	0
(5) Paul Lillios										
	3.00									
Director	0.00	X						0	0	0
(6) John Manos										
	3.00									
Director	0.00	X						0	0	0
(7) George Skarpath:										
	3.00							_	_	_
Director	0.00	X						0	0	0
(8)										
(9)										
(-)										
		1								
(10)										
(11)										
DA4										000

	Form 990 (2013) <b>PANHELLE</b>	NIC SCHOLARSHIP	FOUNDATION 36-4302	248
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	Section A. Officers (A)	(B)		-, ••		C)	- , 50	_, •	and Highest Compensated (D)	(E)		(F)	
	Name and title	Average hours per week (list any hours for	bo	x, unle	Pos check ess pe ind a	sition more erson	than o	an ee)	Reportable compensation from the organization	Reportable compensation from related organizations (W-2/1099-MISC)		Estimate amount other ompensa from th	of
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-WISC)		organizat and rela rganizati	ion ted
(12)							<u>a</u>						
(13)													
(14)													
(15)													
(16)													
(17)													
(18)													
(19)													
1b	Sub-total		<u>                                     </u>					u u					
C	Total from continuation shee	•						u					
<u>d</u>	Total number of individuals (in	cluding but not I	imite	d to				u bov	e) who received more than	\$100,000 in			
	reportable compensation from	the organization	ı u	0								<u> </u>	Yes No
3	Did the organization list any for employee on line 1a? If "Yes,"											3	х
4	For any individual listed on line organization and related organ	e 1a, is the sum nizations greater	of rethan	eport \$15	table 50,00	con	npens f "Ye	satic	on and other compensation	from the		4	x
5	individual  Did any person listed on line	1a receive or acc	crue	com	pens	satio	n fror						
Sect	for services rendered to the or tion B. Independent Contractor		es,"	com	plete	e Sc	nedu	le J	for such person			5	X
1	Complete this table for your fir compensation from the organization	ve highest comp	ensa	ited	inde	pend for th	lent o	conti	ractors that received more	than \$100,000 of	aar		
		(A) d business address	лпрс	<i>,</i> 11341	lion	101 11	ic ca			(B) tion of services	Jai.	Con	(C) npensation
								$\vdash$					
								L					
2	Total number of independent								se listed above) who				

Pa	rt V		<b>nent of Rev</b> o		ains a	response o	r note to anv line	in this Part VIII		
		231	230330			35, 300	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts Its	1a	Federated can	npaigns	1a						
iral our		Membership d		1b						
s, ( Am		Fundraising ev		1c						
ar		Related organ		1d						
s, (		Government grants		1e						
io S	f	All other contribution								
the state		and similar amounts	not included above	1f		285,443				
ontr od C	g	Noncash contribution	ns included in lines 1	a-1f: \$		141,273				
Program Service Revenue Contributions, Gifts, Grants Program Service Revenuts	h	Total. Add line	es 1a–1f		<u> </u>	u	285,443			
enue						Busn. Code				
Seve	2a									
Se F	b									
ervi	С.									
n S	d									
grar	e	All other progra	om conico rovo							
Pro	,	Total. Add line				u				
	3		ome (including							
	•		lar amounts)							
	4		nvestment of tax							
	5	Royalties			· 	u				
		. [	(i) Real			Personal				
	6a	Gross rents								
	b	Less: rental exps.								
	С	Rental inc. or (loss)								
			me or (loss)	<del> </del>		u				
	/a	Gross amount from sales of assets	(i) Securities	6	(ii)	Other				
		other than inventory								
	b	Less: cost or other								
		basis & sales exps.				-				
		Gain or (loss)								
		Net gain or (los			<u> </u>	u				
ne	вa	Gross income fro								
ven			eported on line 1c							
Other Revenue			18							
her	h	Less: direct ex								
ŏ		Net income or			events	u				
		Gross income from								
	-		19							
	b	Less: direct ex								
		Net income or			vities	u				
	10a	Gross sales of	inventory, less							
		returns and all	owances	a						
	b	Less: cost of g	oods sold	b∟						
	С	Net income or			entory					
			ellaneous Revenue			Busn. Code				
	11a					-				
	b									
	q C	All other reven								
	d e	Total. Add line				u				
		Total revenue				u	285.443	0	0	(

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a response			olete column (A).	Π
	ot include amounts reported on lines 6b,	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	20,000	20,000		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	68,157	61,341	2,726	4,090
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	4,750		4,750	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	3,000			3,000
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	15,463	5,398	422	9,643
12	Advertising and promotion	22 22 2		4==	
13	Office expenses	20,026	15,072	655	4,299
14	Information technology	4,965	1,066	3,827	72
15	Royalties	== 2=4	46.100	- 01-	
16	Occupancy	57,354	46,197	5,815	5,342
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25. column				
_	(A) amount, list line 24e expenses on Schedule O.)  Hellenic Birthright	90,619	90,619		
a	· · · · · · · · · · · · · · · · · · ·		30,613	1 112	
b	Bank Charges Taxes & Licenses	1,113		1,113	
C C	· · · · · · · · · · · · · · · · · · ·	220		220	
d	All other evenesses				
e 25	All other expenses	285,675	239,693	19,536	26,446
25 26	Total functional expenses. Add lines 1 through 24e	203,013	239,093	I9,550	20,110
20	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here <b>u</b> if following SOP 98-2 (ASC 958-720)				

32 Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances .....

Total liabilities and net assets/fund balances

PANHELLENIC SCHOLARSHIP FOUNDATION Form 990 (2013) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year 32,706 31,833 Cash—non-interest bearing 2 Savings and temporary cash investments 2 800 3 Pledges and grants receivable, net 3 4 Accounts receivable, net **5** Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 7 Notes and loans receivable, net Inventories for sale or use 8 1,500 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a b Less: accumulated depreciation 10b 10c Investments—publicly traded securities 11 11 Investments—other securities. See Part IV, line 11 12 13 Investments—program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34).... 33,506 16 16 Accounts payable and accrued expenses 300 17 17 20,000 20,000 18 Grants payable 18 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 20,300 26 20,359 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here u and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 Temporarily restricted net assets ..... 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here  $\mathbf{u}$   $|\mathbf{X}|$  and complete lines 30 through 34. Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund

> 33,333 Form **990** (2013)

12,974

12,974

31

32

13,206

13,206

33,506

Schedule O.

Form 990 (2013) PANHELLENIC SCHOLARSHIP FOUNDATION 36-4302482 Page **12** Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI ..... Total revenue (must equal Part VIII, column (A), line 12) 285,443 1 Total expenses (must equal Part IX, column (A), line 25) 2 285,675 2 Revenue less expenses. Subtract line 2 from line 1 3 3 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 13,206 4 Net unrealized gains (losses) on investments 5 5 6 Donated services and use of facilities 6 7 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 12,974 33, column (B)) 10 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII ... Yes No X Accrual Accounting method used to prepare the Form 990: Cash Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? X 2a If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b Х If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Consolidated basis Separate basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

the Single Audit Act and OMB Circular A-133?

Form **990** (2013)

3a

3h

#### SCHEDULE A

(Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

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

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

PANHELLENTC SCHOLARSHIP FOUNDATION

Employer identification number

			PANHELLENIC	SCHOLARSHIP FOU	INDATI	LOIN			30-	-430	<u> </u>			
Pa	art I	Reas	on for Public Charity	Status (All organizations	must c	omplete	e this p	oart.) S	See ins	struction	ons.			
The	orga	nization is not	a private foundation becaus	e it is: (For lines 1 through 11, o	check only	one box	.)							
1		A church, co	nvention of churches, or ass	sociation of churches described	in <b>sectio</b> i	170(b)(	1)(A)(i).							
2		A school des	cribed in section 170(b)(1)(	(A)(ii). (Attach Schedule E.)										
3		A hospital or	a cooperative hospital servi	ce organization described in se	ction 170	(b)(1)(A)	(iii).							
4		A medical re	search organization operated	d in conjunction with a hospital	described	in <b>sectio</b>	n 170(b	)(1)(A)(i	i <b>ii).</b> Ente	er the h	ospital's na	me,		
		city, and stat	e:											
5				of a college or university owned				ental uni	t descri	bed in				
	_	section 170	(b)(1)(A)(iv). (Complete Part	II.)										
6		A federal, sta	ate, or local government or g	governmental unit described in s	section 1	70(b)(1)(A	(v).							
7	П	An organizati	on that normally receives a	substantial part of its support from	om a gove	ernmental	unit or	from the	genera	al public	;			
	_	-	section 170(b)(1)(A)(vi). (C		ŭ				ŭ	·				
8				170(b)(1)(A)(vi). (Complete Part	: II.)									
9	X	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 exempt 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												
			~	0, 1975. See <b>section 509(a)(2)</b>	•			,						
10			=	exclusively to test for public safe										
11	П	-	=	exclusively for the benefit of, to	-				out the	Э				
	ш	•	•	ted organizations described in s	•						า			
		509(a)(3). Ch	neck the box that describes t	the type of supporting organizati	on and co	omplete lii	nes 11e	through	11h.					
		a Type	I <b>b</b> Type II	c Type III–Function	allv intear	ated	d [	Type	e III–No	on-funct	tionally inte	arate	ed	
е	П			ganization is not controlled direct	, ,		one or m				•	9		
	ш	-		er than one or more publicly sup	-									
		or section 50		. , ,		•				. , ,	•			
f			. , . ,	ermination from the IRS that it is	a Type I,	Type II,	or Type	III suppo	orting					
			check this box			,	,,	• • •	ŭ				Γ	٦
g		Since August	t 17, 2006, has the organiza	tion accepted any gift or contrib	ution from	any of the	 ne						L	_
J		following per	•	. , ,		•								
		• .		ontrols, either alone or together	with perso	ns descr	ibed in (	ii) and				Γ	Yes I	No
		., .	•	supported organization?			,	,			11g	(i)		
			member of a person describ								1			
			·	described in (i) or (ii) shove?							11g			
h		` '	, ,	the supported organization(s).								<u> </u>	ı	
	) Nam	e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Did v	ou notify	(vi)	s the	(vii) Amou	ınt of	monetary	_
•		ganization		(described on lines 1–9	1 ' '	sted in your	the organ	ization in	organizati	on in col.		uppor		
				above or IRC section	governing	document?	col. (i) supp		(i) organi. U.S					
				(see instructions))	Yes	No	Yes	No	Yes	No				
(A)														
()														
(B)														
(_,														
(C)														
(Ο)														
(D)														—
(-)														
(E)														—
( <b>-</b> )														
Tota														

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support					,	
Caler	ndar year (or fiscal year beginning in) <b>u</b>	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4 5	Total. Add lines 1 through 3  The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) <b>u</b>	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	<b>Total support.</b> Add lines 7 through 10						
12	Gross receipts from related activities, etc.						
13	First five years. If the Form 990 is for the	-					, _
<u></u>	organization, check this box and stop her	e					
	tion C. Computation of Public S	• •				11	
14	Public support percentage for 2013 (line 6	, column (f) divided	d by line 11, colum	nn (f))		14	<u>%</u>
15	Public support percentage from 2012 Sche						%
16a	33 1/3% support test—2013. If the organ						
	box and <b>stop here.</b> The organization qual						💆 🗀
b	33 1/3% support test—2012. If the organ						
17a	check this box and <b>stop here</b> . The organi <b>10%-facts-and-circumstances test—20</b>						
114	10% or more, and if the organization mee	=					
	Part IV how the organization meets the "fa						
				•			▶ □
b	organization  10%-facts-and-circumstances test—201						······································
-	15 is 10% or more, and if the organization Explain in Part IV how the organization m	meets the "facts-and	and-circumstances d-circumstances" te	" test, check this best. The organization	oox and <b>stop here</b> on qualifies as a p	ublicly	. □
40	supported organization						▶ ∟
18	<b>Private foundation.</b> If the organization did						. ┌
	instructions						▶ ∟

Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

<u></u>	tion A Dublic Comment	quality under th	ie iesis lisieu i	below, please c	omplete Part	11.)	
	tion A. Public Support		T		( n T		
Caler	ndar year (or fiscal year beginning in) <b>u</b>	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	478,244	80,000	181,531	643,718	285,443	1,668,936
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose		53,275				53,275
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	478,244	133,275	181,531	643,718	285,443	1,722,211
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	297,046	80,000	137,515	329,122	196,853	1,040,536
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b	297,046	80,000	137,515	329,122	196,853	1,040,536
8	Public support (Subtract line 7c from						
	line 6.)						681,675
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) <b>u</b>	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
9	Amounts from line 6	478,244	133,275	181,531	643,718	285,443	1,722,211
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	478,244	133,275	181,531	643,718	285,443	1,722,211
14	First five years. If the Form 990 is for the	-	second, third, fou	rth, or fifth tax year	r as a section 501	(c)(3)	
	organization, check this box and stop here						<u></u>
Sec	tion C. Computation of Public Se						
15	Public support percentage for 2013 (line 8,						39.58%
16	Public support percentage from 2012 Sche					16	40.48 %
	tion D. Computation of Investme					11	
17	Investment income percentage for 2013 (li						<u>%</u>
18	Investment income percentage from 2012	Schedule A, Part III	I, line 1/	44 and the 45 '			<u>%</u>
19a	33 1/3% support tests—2013. If the organ						⊾ ਢਾ
<b>L</b>	17 is not more than 33 1/3%, check this bo		=				<b>&gt;</b> X
b	33 1/3% support tests—2012. If the organine 18 is not more than 33 1/3%, check the						▶ □
20	<b>Private foundation.</b> If the organization did						<b>F</b> H
	and the second s		,	.,			

Schedule A (F	Form 990 or 990-EZ)	2013 <b>P</b> .	ANHELLENIC	SCHOLARS	HIP F	OUNDATION	36-430	2482	Page 4
Part IV	Supplemental Part III, line 12	Inform	<b>ation.</b> Provide the omplete this par	ne explanations t for any addition	required	l by Part II, line mation. (See in	10; Part II, lin	ne 17a or	17b; and
	,			•		,	,		

Schedule B (Form 990, 990-EZ, or 990-PF)

**Schedule of Contributors** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

u Attach to Form 990, Form 990-EZ, or Form 990-PF.

u Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization

PANHELLENIC S	SCHOLARSHIP FOUNDATION	36-4302482								
Organization type (check o	ne):									
Filers of:	Section:									
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization									
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation									
	527 political organization									
Form 990-PF	501(c)(3) exempt private foundation									
	4947(a)(1) nonexempt charitable trust treated as a private foundation									
	501(c)(3) taxable private foundation									
, ,	covered by the <b>General Rule</b> or a <b>Special Rule</b> . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See								
General Rule										
_	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in morne contributor. Complete Parts I and II.	ney or								
Special Rules										
under sections 509(a	(3) organization filing Form 990 or 990-EZ that met the 33 <sup>1</sup> / <sub>3</sub> % support test of the regulates (1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 d II.	oution of								
during the year, tota	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, less, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.									
during the year, con not total to more tha year for an exclusive applies to this organ	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year									
990-EZ, or 990-PF), but it <b>m</b>	at is not covered by the General Rule and/or the Special Rules does not file Schedule B (last answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, continued to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, continued to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, continued to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, continued to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, continued to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, continued to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, continued to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, continued to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, continued to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, continued to continued to continued to continued to continue the filing requirements of Schedule B (Form 990, 990-EZ, continued to continued to continued to continued to continued to continue the co	990-EZ or on its								

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization Employer identification number

P	ANHELLENIC SCHOLARSHIP FOUNDATION	36-4302482				
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or	Accounts.				
	Complete if the organization answered "Yes" to Form 990, Part IV, line 6.					
	(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised					
	funds are the organization's property, subject to the organization's exclusive legal control?	Yes No				
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used					
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose					
	conferring impermissible private benefit?	Yes No				
Pa	rt II Conservation Easements.					
	Complete if the organization answered "Yes" to Form 990, Part IV, line 7.					
1	Purpose(s) of conservation easements held by the organization (check all that apply).					
	Preservation of land for public use (e.g., recreation or education)  Preservation of an historically imp	ortant land area				
	Protection of natural habitat Preservation of a certified historic	structure				
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conse	rvation				
	easement on the last day of the tax year.	Held at the End of the Tax Year				
а	Total number of conservation easements	2a				
b	Total acreage restricted by conservation easements	2b				
С	Number of conservation easements on a certified historic structure included in (a)	2c				
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a					
	historic structure listed in the National Register	2d				
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization	on during the				
	tax year <b>u</b>					
4	Number of states where property subject to conservation easement is located ${f u}$					
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	<u>_</u>				
	violations, and enforcement of the conservation easements it holds?	Yes No				
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year					
	u					
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year					
	u\$					
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)	<u></u>				
	(i) and section 170(h)(4)(B)(ii)?	Yes No				
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement					
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that de-	escribes the				
	organization's accounting for conservation easements.					
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets.				
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.					
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and be	palance sheet				
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in further	erance of				
	$public\ service,\ provide,\ in\ Part\ XIII,\ the\ text\ of\ the\ footnote\ to\ its\ financial\ statements\ that\ describes\ these\ items.$					
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balar	nce sheet				
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in further	erance of				
	public service, provide the following amounts relating to these items:					
	(i) Revenues included in Form 990, Part VIII, line 1	u \$				
	(ii) Assets included in Form 990, Part X					
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, pro					
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:					
а	Revenues included in Form 990, Part VIII, line 1	u \$				
b	Assets included in Form 990, Part X					

Port III Organizations Maintainin				20-4302 2r Other Si		\ ccotc	/oontii		age <b>∠</b> ∖\
Part III Organizations Maintainin	_	•	•				(COITIII	nueu	)
3 Using the organization's acquisition, access collection items (check all that apply):	sion, and other record	s, check any of the fo	llowing that are	e a significant i	ise of its				
	. $\Box$								
a Public exhibition		Loan or exchange pro	-						
<b>b</b> Scholarly research	е 🔛	Other							
<b>c</b> Preservation for future generations									
4 Provide a description of the organization's	collections and explain	n how they further the	organization's	exempt purpos	se in Par	t			
XIII.									
5 During the year, did the organization solicit	or receive donations	of art, historical treasu	ures, or other s	imilar				_	,
assets to be sold to raise funds rather than		part of the organization	n's collection?				Ye	s	No
Part IV Escrow and Custodial A									
Complete if the organization	on answered "Yes	s" to Form 990, Pa	art IV, line 9	, or reported	d an an	nount o	on For	m	
990, Part X, line 21.									
1a Is the organization an agent, trustee, custo	dian or other intermed	diary for contributions	or other assets	not					_
included on Form 990, Part X?							Ye	s	No
<b>b</b> If "Yes," explain the arrangement in Part XI	II and complete the fo	ollowing table:							
							Amount	i	
c Beginning balance					1c				
d Additions during the year									
e Distributions during the year									
f Ending balance									
2a Did the organization include an amount on	Form 990. Part X. line	e 21?					Ye	s	No
<b>b</b> If "Yes," explain the arrangement in Part XI								· -	1
Part V Endowment Funds.	ii. Oncok nere ii tile e	Apianation has been p	oroviaca iii i ait	. 7(111					
Complete if the organization	n answered "Yes	" to Form 990 P	art IV line 1	0					
Complete ii the organizate	(a) Current year	(b) Prior year	(c) Two years		Three years	s hack	(e) Four	r vears	hack
1a Reginning of year helence	•		(c) Two years	3 back (u)	Triice years	5 Dack	(6) 1 001	yours	back
1a Beginning of year balance									
<ul><li>b Contributions</li><li>c Net investment earnings, gains, and</li></ul>									
losses									
d Grants or scholarships									
e Other expenditures for facilities and									
f Administrative expenses									
g End of year balance									
2 Provide the estimated percentage of the cu	•	e (line 1g, column (a)	) held as:						
${f a}$ Board designated or quasi-endowment ${f u}$ .	%								
<b>b</b> Permanent endowment <b>u</b> %									
${f c}$ Temporarily restricted endowment ${f u}$									
The percentages in lines 2a, 2b, and 2c sh									
3a Are there endowment funds not in the poss	session of the organization	ation that are held and	d administered	for the			ſ		1
organization by:								Yes	No
(i) unrelated organizations							3a(i)		
(ii) related organizations							3a(ii)		
<b>b</b> If "Yes" to 3a(ii), are the related organization	ns listed as required	on Schedule R?					3b		
4 Describe in Part XIII the intended uses of t	he organization's end	owment funds.							
Part VI Land, Buildings, and Eq	uipment.								
Complete if the organization	n answered "Yes	" to Form 990, Pa	art IV, line 1	1a. See Foi	m 990,	Part >	(, line	10.	
Description of property	(a) Cost or other		other basis	(c) Accumu			(d) Book		
	(investment)	(oth	ner)	depreciati	on				
1a Land									
<b>b</b> Buildings									
c Leasehold improvements	.								
d Equipment						1			
e Other									
Total. Add lines 1a through 1e. (Column (d) mus		rt X. column (B). line 1	10(c).)		1				

Part VII	Investments—Other Securities.  Complete if the organization answered "Yes" to	Form 990 Part IV lin	e 11h See Form 990 Part X line	12
	(a) Description of security or category	(b) Book value	(c) Method of valuation:	12.
	(including name of security)	(b) book value	Cost or end-of-year market value	
(1) Financial				
(1) Financiai	derivatives			
	eld equity interests			
(3) Other				
( <u>B)</u>				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.) <b>u</b>			
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Yes" to	Form 990, Part IV, lin	e 11c. See Form 990, Part X, line	13.
	(a) Description of investment	(b) Book value	(c) Method of valuation:	
			Cost or end-of-year market value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 13.) <b>u</b>			
Part IX	Other Assets.	5 000 D ( N ( N	441.0 5 000 5 434 11	
	Complete if the organization answered "Yes" to	Form 990, Part IV, lin		
	(a) Description		(b) Book	value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 15.)		u	
Part X	Other Liabilities.		и	
I alt X	Complete if the organization answered "Yes" to	Form 000 Part IV lin	se 11e or 11f See Form 990 Part	Y
	line 25.	Tomi 550, Fait IV, III	ic the of this occitonin 550, tall i	Λ,
		(h) Dook value		
1. (1) Fodorol	(a) Description of liability	(b) Book value		
	income taxes		-	
(2)				
(3)			-	
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990. Part X. col. (B) line 25.) 11			

DAA

Schedule D (Form 990) 2013 PANHELLENIC SCHOLARSHIP FOUNDATION Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements 285,443 Amounts included on line 1 but not on Form 990, Part VIII, line 12: a Net unrealized gains on investments **b** Donated services and use of facilities 2b c Recoveries of prior year grants 2c d Other (Describe in Part XIII.) e Add lines 2a through 2d 2e 285,443 3 Subtract line 2e from line 1 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII.) 4b 4c Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 285,443 5 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements 285,675 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities 2a **b** Prior year adjustments 2b c Other losses 2c d Other (Describe in Part XIII.) e Add lines 2a through 2d 2e 285,675 3 Subtract line 2e from line 1 3 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 4a **b** Other (Describe in Part XIII.) c Add lines 4a and 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 285,675 Part XIII Supplemental Information Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D (Form 990) 2013

Schedul	le D (F	orm 990) 2013	PANHELLENIC	SCHOLARSHIP	FOUNDATION	36-4302482	Page <b>5</b>
Part	XIII	Supplement	al Information (co	SCHOLARSHIP ontinued)			
			,	,			
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SCHEDULE I (Form 990)

Department of the Treasury

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

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

u Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organiz	PANHELLENIC SCHOLAR		NDATIC	ON .				Employer identification number 36-4302482	
the selec	General Information on Grants and organization maintain records to substantiate the tion criteria used to award the grants or assistant in Part IV the organization's procedures for mon	e amount of the g	-						] No
Part II	Grants and Other Assistance to Go Part IV, line 21, for any recipient that	vernments a	nd Orgar	nizations in the U				nswered "Yes" to Form 99	90,
1 (a)	Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description o		
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
2 Enter tota	al number of section 501(c)(3) and government of	organizations listed	d in the line	1 table				u	

Schedule I	(Form 990) (2013)	PANHELLENIC	SCHOLARSHIP	FOUNDATION	36-4302482				
Part III	Grants and	Other Assistance	to Individuals in th	e United States.	Complete if the organization	answered "Yes"	to Form 990,	Part IV, line	22
	Part III can	be duplicated if addi	tional space is need	led.					

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Scholarships	2	20,000			
2					
3					
4					
5					
6					
7					
Part IV Supplemental Information. Pro	vide the information re	equired in Part I, line	e 2, Part III, column (l	b), and any other additiona	al information.

SCHEDULE M (Form 990)

**Noncash Contributions** 

2013

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

u Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

u Attach to Form 990.

 ${f u}$  Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

PANHELLENIC SCHOLARSHIP FOUNDATION

Employer identification number 36-4302482

Pa	art I Types of Property				·			
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of determining			
		applicable	items contributed	Form 990, Part VIII, line 1g	noncash contribution amou	unts		
1	Art — Works of art							
2	Art — Historical treasures							
3	Art — Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded							
10	Securities — Closely held stock							
11	Securities — Partnership, LLC,							
	or trust interests							
12	Securities — Miscellaneous							
13	Qualified conservation							
	contribution — Historic							
	structures							
14	Qualified conservation							
	contribution — Other							
15	Real estate — Residential							
16	Real estate — Commercial							
17	Real estate — Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other $\mathbf{u}($ <b>Admin Support</b> )	X	1	141,273	Donor's cost			
26	Other $\mathbf{u}($ )							
27	Other <b>u</b> ()							
28	Other <b>u</b> ()							
29	Number of Forms 8283 received by	the organi	zation during the tax yea	r for contributions for				
	which the organization completed Fo	orm 8283,	Part IV, Donee Acknowl	edgement	29			
							Yes	No
30a	During the year, did the organization	receive by	y contribution any proper	ty reported in Part I, lines 1	- 28, that			
	it must hold for at least three years f							
	used for exempt purposes for the entire holding period?							<u> </u>
b	If "Yes," describe the arrangement in							
31	Does the organization have a gift acceptance policy that requires the review of any non-standard							
	contributions?					31		X
32a	Does the organization hire or use thi	ird parties	or related organizations	to solicit, process, or sell n	oncash			
	contributions?					32a		<u>X</u>
b	If "Yes," describe in Part II.							
33	If the organization did not report an a	amount in	column (c) for a type of	property for which column (	(a) is checked,			
	describe in Part II.							

Schedule M (Form	990) (2013)	PANHELLENIC	SCHOLARSHIP	FOUNDATION	36-4302482	Page <b>2</b>
Part II	the orgai	nization is reporting i	in Part I, column (b)	, the number of con	36-4302482 tt I, lines 30b, 32b, and 3 tributions, the number of	3, and whether items received,
	or a com	bination of both. Als	o complete this par	t for any additional i	nformation.	
• • • • • • • • • • • • • • • • • • • •						
•••••						

### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047

2013

Department of the Treasury Internal Revenue Service Name of the organization  $u \ \ \text{Attach to Form 990 or 990-EZ}. \\ u \ \ \text{Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.}$ 

Open to Public Inspection

Employer identification number

PANHELLENIC SCHOLARSHIP FOUNDATION	36-4302482
Form 990, Part I, Line 6	
Administrative personnel and office occupancy resources	were provided by
Tomaras Investments, Ltd. valued at \$136,853 and \$119,21	15 for the years
2013 and 2012, respectively.	
Form 990, Part VI, Line 11b - Organization's Process to	Review Form 990
Copy of Form 990 is provided to members of the Board of	Directors prior to
filing. Members are asked to comment and to confirm, to	the best of their
knowledge, that the disclosures and representations made	in the Form are
accurate.	
Form 990, Part VI, Line 12c - Enforcement of Conflicts	Policy
Members of the Board of Directors have received a copy of	of the Conflicts of
Interest Policy and are advised of any changes to the po	olicy.
Form 990, Part VI, Line 19 - Governing Documents Disclo	sure Explanation
Upon request, the Organization provides copies of its Fo	orm 1023 and Forms
990. The Organization also provides a link on its websit	te allowing the
public to view it's most recent year's Form 990.	