

**Please submit by
July 15, 2018*

*Return to: phi.eta.sigma@wku.edu
Elaine J. Powell
Phi Eta Sigma Honor Society, WKU
1906 College Hts. Blvd. #11062
Bowling Green, KY 42101-1062*

**PHI ETA SIGMA
CHAPTER ANNUAL REPORT**

(Required for all chapters of Phi Eta Sigma to submit annually)

Name of School _____

Chapter Adviser (include Dr., Mr., Ms., etc.) _____

Adviser's Campus Mailing Address: _____ Shipping Address if different: (no P.O. box please) _____

Adviser's Telephone: _____ Adviser's Email: _____

Additional Chapter Contact Information (if applicable)

Co-Adviser: _____ Admin. Support Person: _____

Telephone: _____ Telephone: _____

Email: _____ Email: _____

Chapter Financial Reporting for 2017-2018—

Chapter's Federal EIN (taxpayer identification number): _____

**If your chapter will not be included in the Phi Eta Sigma group tax return, you must file separately or be included on another group return. Please specify below how your chapter files:*

_____ Chapter files separately – Form 990, 990-N, or 990-EZ

_____ Files as part of another group return – Name of group _____

_____ Files as part of Phi Eta Sigma group exemption

Information in the section below is **required** if you previously authorized Phi Eta Sigma national to include your chapter in its group tax return for the IRS. Any chapter that does not submit this information by the **July 15 deadline** will not be listed on Phi Eta Sigma's group filing for this year. All Phi Eta Sigma chapters are requested to complete this section for general information, regardless of how the chapter files with the IRS.

Cash balance as of 7/1/2017: \$ _____

Income:

Induction fees \$ _____

Investments \$ _____

Fundraising/donations \$ _____

Plus: Total Income \$ _____

Disbursements:

Operating expenses* \$ _____

National induction fees paid \$ _____

Local scholarships awarded \$ _____

Minus: Total Disbursements \$ _____

Cash balance as of 6/30/2018: \$ _____

Number of local scholarships awarded _____

**If Operating Expenses exceed \$100, please attach a breakdown of the various expenses (i.e. postage, printing, catering, etc.).*

Signature of adviser or reporting officer: _____

Position held: _____

Date: _____