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Form **990-EZ** 

#### Short\_Form **Return of Organization Exempt From Income Tax**

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

OMB No 1545-1150 2009

Open to Public Inspection

Department of the Treasury Intérnal Revenue Service

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

and ending For the 2009 calendar year, or tax year beginning **Employer identification number** Check if applicable Please Name of organization use IRS Address change label or 23-7094636 COLUMCILLE BUILDING CORPORATION Name change print or Telephone number Number and street (or P O box, if mail is not delivered to street address) Room/suite Initial return type. 301-839-6200 See 1633 TUCKER RD Termination Specific Group Exemption Amended return City or town, state or country, and ZIP + 4 Instruc-MD 20744-4334 FORT WASHINGTON Number Application pending tions. X Cash • Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach G Accounting method a completed Schedule A (Form 990 or 990-EZ). Other (specify) Check X if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF) WWW.RC.NET/WASHINGTON/KC5317, Tax-exempt status (check only one) — X 501(c) ( 2) ◀ (insert no ) 4947(a)(1) or 527 if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return 54,393 Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) Part I Contributions, gifts, grants, and similar amounts received 2 2 Program service revenue including government fees and contracts 3 3 Membership dues and assessments 54,393 4 Investment income Gross amount from sale of assets other than inventory 5a 5b b Less, cost or other basis and sales expenses 5c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here Revenue of contributions Gross revenue (not including \$ \_ reported on line 1) 6Ь Less, direct expenses other than fundraising expenses 6c С Net income or (loss) from special events and activities (Subtract line 6b from line 6a) Gross sales of inventory, less returns and allowances 7a Less, cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c 8 8 Other revenue (describe 54,393 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 9 9 10 Grants and similar amounts paid (attach schedule) 10 RECEIVED 11 11 Benefits paid to or for members 12 12 Salaries, other compensation, and employee benefits 13 Professional fees and other payments to independent contractors 13 SEP 2 4 2010 Occupancy, rent, utilities, and maintenance 14 14 15 15 Printing, publications, postage, and shipping Other expenses (describe ► SEE STATEMENT 1 98,163 OGDEN UT 16 16 98,163 17 17 Total expenses. Add lines 10 through 16 -43,770 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 489,485 19 end-of-year figure reported on prior year's return) Other changes in net assets or fund balances (attach explanation) 20 20 445,715 21 Net assets or fund balances at end of year Combine lines 18 through 20 Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ Part II (A) Beginning of year (B) End of year (See the instructions for Part II) 24,105 55,716 22 22 Cash, savings, and investments 433,769 421,610 23 23 Land and buildings 24 24 Other assets (describe 445,715 489,485 25 25 Total assets 26 26 Total liabilities (describe 445. 489,485 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2009)

Form 990-EZ (2009) COLUM	CILLE BUILDING CORPORAT	ION23	3-7094636			Page
Part III Statement of P	Program Service Accomplishments	(See the instruct	ions for Part II	l.)	Ex	penses
What is the organization's primary e				1	(Required	for section
SEE STATEMENT 2 ,		501(c)(3) and 501(c)(4)				
Describe what was achieved in carr		•	ons and section			
manner, describe the services provi	1	4947(a)(1) trusts; optional				
each program title	_	for others	)			
28 SEE STATEMENT 3						
				[		
(Grants \$	) If this amount includes foreign grants,	check here	<u> </u>		28a	
29						
				İ		
			_	را بت		
(Grants \$	) If this amount includes foreign grants,	check here	<u> </u>		29a	<del></del>
30						
10 vanta 6	). If this amount includes foreign groups	ahaak hara	<b>.</b>	<b>тΙ</b> ,	30a	
(Grants \$	) If this amount includes foreign grants,	CHECK Here		<del>'     `</del>	Jua	
31 Other program services (attach (Grants \$		chack hara	<b>.</b>	$\Box$ ] ,	31a	
32 Total program service expens	) If this amount includes foreign grants,	CHECK Here			32	· ·
	rectors, Trustees, and Key Employees. List 6	each one even if not co	omnensated (See t			Part IV )
FI ATTIVIT Elst Of Officers, Di	rectors, trustees, and key Employees. List	(b) Title and average	(c) Compensation	(d) C	ontributions to	(e) Expense
(a)	Name and address	hours per week devoted to position	(If not paid, enter -0)		e benefit plans & d compensation	account and other allowances
GARY J. TAYLOR	FORT WASHINGTON	PRESIDENT	00. 0.7		- component	
1633 TUCKER ROAD	MD 20744	2.00	,		0	(
CLIFFORD WOODS	FORT WASHINGTON	VICE-PRESIDE				
1633 TUCKER ROAD	MD 20744	2.00	0		0	
MICHAEL R. HERMANN	FORT WASHINGTON	TREASURER				
1633 TUCKER ROAD	MD 20744	2.00	0		0	(
JOSEPH CHANCIO	FORT WASHINGTON	SECRETARY				
1633 TUCKER ROAD	MD 20744	2.00	0		0	(
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	other information (Note the statement requirements in the instructions for rare v.)		Yes	No
33	Did the organization eagage in any activity not previously reported to the IRS? If "Yes," attach a detailed			1.00
	description of each activity	33		X
34	Were any changes made to the organizing or governing documents? If "Yes," attached a conformed copy of			
	the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> reported			
	on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section			
	6033(e) notice, reporting, and proxy tax requirements?	35a		<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
	during the year? If "Yes," complete applicable parts of Schedule N	36		<u> </u>
37a	Enter amount of political expenditures, direct or indirect, as described in the instr			
b	Did the organization file Form 1120-POL for this year?	37b		Х
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		Х
ь	If "Yes," complete Schedule L, Part II and enter the total amount involved			,
39	Section 501(c)(7) organizations. Enter	7		
а	Initiation fees and capital contributions included on line 9			,
b	Gross receipts, included on line 9, for public use of club facilities		` *	
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under:			,
	section 4911 ▶, section 4912 ▶, section 4955 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit	1		'
_	transaction during the year or is it 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	40b		
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on	4		
	organization managers or disqualified persons during the year under sections 4912,	3		ĺ
	4955, and 4958	*		'
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c			
_	reimbursed by the organization			, ,
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter		>	1
Ū	transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed  NONE			
42a	The organization's books are in care of ▶ MIKE HERMANN Telephone no ▶ 30	1-83	9-1	<u>691</u>
	1633 TUCKER RD			
	Located at ► FORT WASHINGTON, MD ZIP+4 ► 20	744-	433	4
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		Yes	No
	account)?	42b		х
	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 Accounts.			,
С	At any time during the calendar year, did the organization maintain an office outside of the U S ?	42c		X
·	If "Yes," enter the name of the foreign country:			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			$\blacktriangleright$
	and enter the amount of tax-exempt interest received or accrued during the tax year			٠
	and an arrangement of the control of			
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			
	Form 990-EZ	44	ľ	x
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If			
	"Yes," Form 990 must be completed instead of Form 990-EZ	45	`	x
		Form 99	0-EZ	
				,

Form **990-EZ** (2009)

# Form 4562

Department of the Treasury Internal Revenue Service

## **Depreciation and Amortization**

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172 2009

Attachment Sequence No 67

Name(s) shown on return

COLUMCTILE BUILDING CORPORATION

Identifying number

		COLUMCI	TTR BOILDI	NG CORPOR	ATIO	N			1 43-	<i>,</i> 09	4030
		y to which this form relates									
		ROAD FACILIT						·			
Pa	rt I	Election To Expens						alata Di			
		Note: If you have a				etore you	con	ipiete Pa	art I.		250,000
1	Maximum amount See the instructions for a higher limit for certain businesses  Total cost of section 179 property placed in service (see instructions)							2	250,000		
2			•	· ·		\			ł	3	800,000
3	Threshold cost of section 179 property before reduction in limitation (see instructions)  Reduction in limitation, Subtract line 3 from line 2. If zero or less, enter -0-						-	4			
4		ation for tax year Subtract line		<u>=</u>		congrately see	netru	rtione		5	
5	Dollar limita	(a) Description		less, enter -0- ii mai		business use			lected cost		
6		(a) Description	or property		(3) 0001	(000011000 000	Jy,	(-/-			; 
•											}
7	Listed pro	perty Enter the amount fr	rom line 29				7				
8	•	• •		ın column (c), line	es 6 and	7				8	
9	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7.  Tentative deduction. Enter the smaller of line 5 or line 8.							9			
0	Carryover of disallowed deduction from line 13 of your 2008 Form 4562							10			
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)						) [	11			
2	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11						12				
13	Carryove	of disallowed deduction t	to 2010 Add lines 9	and 10, less line 1	2	•	13		·		ж
Note	: Do not us	e Part II or Part III below t									
Pa	ırt II 📒	Special Depreciation	on Allowance a	nd Other Depi	eciatio	on (Do no	t incl	ude liste	d prope	rty.)	(See instr.)
14	Special d	epreciation allowance for	qualified property (ot	her than listed pro	perty) pl	aced in servi	ce				
	during the tax year (see instructions)										
Property subject to section 168(f)(1) election											
16	Other der	preciation (including ACRS								16	
<u>. Pa</u>	<u>irt III 📗</u>	MACRS Depreciati	on (Do not inclu			<u>See instru</u>	<u>ictior</u>	าร.)	<del></del>		
					ion A						10 150
17		deductions for assets plac	-					🛌		17	12,159
18	If you are e	lecting to group any assets pla	aced in service during the Assets Placed in Se							tam	
		Section B—/	(b) Month and year	(c) Basis for depre			Gene	rai Deprec	nation Oy	,,,,,,,	
	(a) Clas	sification of property	placed in service	(business/investm only-see instruc	ent use	(d) Recovery period	(e) C	Convention	(f) Meth	nod	(g) Depreciation deduction
19a	3-year p	roperty	. 100	_							
b	5-year p	roperty	ar and a						_		
С	7-year p	roperty					<u> </u>				
	10-year p										
	15-year p		Market Market				<u> </u>				
	20-year p						<u> </u>		0.0		
	25-year p		1			25 yrs.	<del> </del>		S/L		
h	Residenti property	al rental				27 5 yrs		MM	S/L		
			_			27 5 yrs		MM MM	S/L		
1	property	ential real				39 yrs		-	S/L		
	property	Section C -A	ssets Placed in Serv	ico During 2000	Tax Vaar	Using the /	lterns	MM tive Depr	S/L	vetem	<u> </u>
20-	Class life		1 12 24 \$ 1	ice During 2009	I ax Teal	Using the A		ilive Depi	T	yoteni	
	Class life		, , , , , ,			12 yrs	$\vdash$		S/L S/L		
	12-year					<del> </del>	$\vdash \vdash$	MM	S/L		
	40-year art IV	Summary (See ins	tructions )	<u> </u>	_	40 yrs	I	IVIIVI			<u> </u>
<u> Pa</u> 21		operty Enter amount from								21	
21 22	•	d amounts from line 12, li		nee 10 and 20 in a	olumo /	n) and line 0	1 Ent	er here		<b> </b> -	
~~		e appropriate lines of you	· ·				.,	U. 11016		22	12,159
23		is shown above and place						Ī			
LJ		f the basis attributable to s	<del>-</del>	io odirent year, er			23				
	PO. 1011 0	Dadio attributable to t									

### **Federal Statements**

#### Statement 1 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
TUCKER ROAD FACILITY	\$
ACCOUNTING FEES	1,350
MANAGEMENT FEES	9,383
INSURANCE	1,367
CLEANING/MAINTENANCE	17,205
SUPPLIES	1,435
REPAIRS	1,970
PAYROLL TAXES	350
PROPERTY TAX	720
LICENSES & PERMITS	175
UTILITIES	34,651
NON-INVESTMENT DEPRECIATION	12,159
SALARIES & WAGES	4,575
TRASH REMOVAL	3,148
REFRIGERATION	2,726
EVENT & HALL SET-UP	2,350
CABLE	1,841
PAYROLL SERVICE CHARGES	898
FOD SAFETY	895
SECURITY & FIRE PROTECTION	482
MISCELLANEOUS	261
BANK FEES	222
TOTAL	\$ 98,163

#### Statement 2 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

#### Description

THE COLUMCILLE BUILDING CORPORATION IS AN IRC 501(C)(2) TITLE HOLDING CORPORATION FOR THE BENEFIT OF THE FORT WASHINGTON, MD COUNCIL OF THE KNIGHTS OF COLUMBUS. WHEN NOT IN USE BY THE ORGANIZATION, THE TUCKER ROAD HALL FACILITY IS A COMMUNITY RESOURCE AVAILABLE FOR WEDDINGS, BIRTHDAYS AND OTHER EVENTS.

# Statement 3 - Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

#### Description

THE COLUMCILLE BUILDING CORPORATION IS A 501(C)(2) TITLE HOLDING CORPORATION FOR THE BENEFIT OF A NON-PROFIT ORGANIZATION. WHEN NOT IN USE BY THE LOCAL KNIGHTS OF COLUMBUS COUNCIL, THE TUCKER ROAD COMMUNITY HALL FACILITY IS AVAILABLE AS AN AFFORDABLE LOCAL VENUE FOR WEDDINGS, BIRTHDAYS, REUNIONS AND OTHER EVENTS.