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### **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 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Δ	For th	he 2009 ca	alendar v	A3F OF 1				CTOBER 1			d ending				, 20 10	44
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_		applicable	use IRS		usiness A		ACCO	NEEK COR	FURA	HON			-  -	52		
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	Termina		instruc- tions.					0607 <i>-</i> 0560						_		
		ed return .		and addr				0007-0300					G	Gross rece	erpts \$ 5	<u>54,736</u>
	Applicati	on pending			•							1	-		or affiliates? <b>Yes</b>	∐No
_	Tay-ev	empt status	ROBER	1(c) ( <b>2</b> )				) or	7						cluded? LYes	□No
<u> </u>	Webs		<b>y</b> 30	1(0) ( 2 )	(IIISEIL	110) _	_ 4547(a)(1)	) UI 32	.1						st (see instructio	ns)
K		f organization	Cornors	ation T	niet 🗆 🗛	esociation	Other !			Vear	of formation		_	State of M	egal domicile M	<u> </u>
	art I	Summ		20011	031 23 74	3300141011	<u> </u>			- 1001	or rommation	1304	1 101	Otate Of R	egai domicile	<u></u>
Activities & Governance	1	Briefly de	escribe the	FOR K	NIGHT	S OF C	OLUMBU	US COUNC	:IL 							
Š	2	Check this	box ► L	jifthe o	rganızatio	n discont	inued its of	perations or d	isposed of	of more	than 25% of	its net as	sets			
~			-			_	-	dy (Part VI		-				3		168
tes					-			governing	body (P	art VI	, line 1b)			4		
ξį		Total nur						•						5		0
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								rt VIII, colu		line 1:	2			7a		0
_	B	Net unrei	ated bus	iness ta	axable i	ncome	from For	m 990-T, li	ne 34.		<del></del>	Prior	<u></u>	7b		0
Revenue	8 Contributions and grants (Part VIII, line 1h)											Current Yea				
æ																<u> 20,555</u>
	11	Other rev	/enue (Pa	art VIII,	column	(A), line	es 5, 6d,	8c, 9c, 10	c, and	11e)	40, 1			3,038		2,803
	Ĭ							Part VIII, co		), line	12)			5,513		3,358
60								ın (A), lınes n (A), lıne 4					16	5,500	1	1,247
Expenses								art IX, colur		nes 5-	-10)		1	,285		495
ē								line 11e)								
ũ	b	Total fund	draising e	xpense	s (Part I)	X, colum	nn (D), line	e 25) ▶								
	17	Other exp	penses (F	Part IX,	column	ı (A), lın	es <del>-11a-1</del>	1d, 11f-24	f) .		_ · · ├─			,363	4	1,113
	18	Total exp	enses. A	Add line	s 13–17	7 (must	equal Ra	RECENT	WEAD	ine 25	(1)			3,148	5	2,855
F 60		Revenue	less expe	enses. S	ubtract	line 18 1	1 1	12		70				7635		503
ts o							181 1	uic 1 E		Ø	Beg	inning of (			End of Year	
\sse Bak	20	Total ass			-		4 .	NUG 1.5	. 2011		∙   •	1	,352	,420	1,37	6,152
Net Assets or Fund Balances	21 22	Total liab					h 21 4				· ·		255	0	4.03	0
	rt		ature B		ces. su	Duaci	10 21 31	GDEN	(IT	<del>"=</del>	• • • • • • • • • • • • • • • • • • • •		,35∠	,420	1,37	6,420
Sig		Under pe	nalties of p	erjury, I de	eclare that	it I have ex lete Decl	xamined this	is return, inclu preparer (other	ding accor than office	ompanyi cer) is b	ng schedule pased on all	s and state information	ement n of w	s, and to t hich prep	the best of my kn arer has any kno	owledge wledge
He			ature of offi	ert	L.	Str	i Eq.	e1, P	resi	0Ei	zi T	Da	ate /	7ug	9,201,	
Paic	l parer's	Preparer's signature		Gle	~~ C	(W	Ilm	V	8/	6/1	Check self- emplo	cif oyed ►		parer's idei	ntifying number ns)	
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		address,	and ZIP +					ALETHOR				Phone	no 🕨	( 443 )	575-644	5
Ma	y the	IRS discu	uss this r	eturn w	ith the	prepare	r shown	above? (se	e instri	uctions	s)				✓ Yes	No
For	Priva	cy Act and	d Paperw	ork Red	luction A	Act Note	ce, see th	ne separate	instruct	tions.		Cat No 1	1282	Y	Form 990	(2009)

	Form	990	(2009)	1
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Page 2

Par	Statement of Program Service Accomplishments
1	Briefly describe the organization's mission:
	THIS CORPORATION MOLDS TITLE TO TWO BUILDINGS FOR JOHN F KENNEDY COUNCIL # 5482 OF THE KNIGHTS
	OF COLUMBUS. THE CORPORATION GENERATES FUNDS THROUGH RENTAL OF THE BUILDINGS AND A CLUB
	House all funds are used to defray the cost of maintaining and operating the buildings.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
	(0   ) (7 ) (8 ) (22 ) (90 )
4a	(Code:) (Expenses \$including grants of \$) (Revenue \$32,800_) THE HOLDING OF TITLE AND LEASING OR RENTING OUT OF REAL PROPERTY, PRIMARY INCOME FROM RENTAL.
	20.555
4b	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ 20,555)  THE SECOND LARGEST ACTIVITY WAS THE HOLDING AND INVESTING OF EXCESS FUNDS, THE EARNINGS OF  OF WHICH GOES TO THE MAINTANCE OF A BUILDING FOR THE KNIGHTS OF COLUMBUS OF JOHN F KENNEDY
	COUNCIL # 5482
4c	(Code. ) (Expenses \$ including grants of \$) (Revenue \$
	THE THIRD ACTIVITY WAS FROM THE OPERATION OF THE CLUB HOUSE FOR MEMBERS.
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )
-40	(Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses ▶
4e	Total program service expenses >

Par	t 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		1
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		✓
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		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21; serve as a 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		
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11		
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	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.			
•	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.			
	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.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12		
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$ Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		<del></del>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		
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	17		
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		
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		
<u> 20</u>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		

Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		
22	Did the organization report more than \$5,000 of grants and 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		
23	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		
24a	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 25	24a		
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		
25a	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		
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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<b>✓</b>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		<b>√</b>
28	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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a 28b		<b>✓</b>
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<b>√</b>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<b>√</b>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		✓.
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	1	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		1
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	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		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	1	
			000	

Form	990 (2009)		F	age 5
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			l
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		1
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 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?	2b		<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
ь	If "Yes," enter the name of the foreign country: ▶			<u> </u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
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?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			ļ
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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			İ
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7 <u>g</u>	ļ	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	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		
9	Sponsoring organizations maintaining donor advised funds.			
a	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:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
a	dross meditie from members of shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   12b	12a		

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.

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct			
•	supervision of officers, directors or trustees, or key employees to a management company or other person?	з		1
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		1
6	Does the organization have members or stockholders?	6		1
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
, a	of the governing body?	7a	1	
h	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	1	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
J	the year by the following:	1		
а	The governing body?	8a	1	
	Each committee with authority to act on behalf of the governing body?	8b	1	
9	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	9a		1
Sec	tion B. Policies (This Section B requests information about policies not required by the Inter-			
	enue Code.)	,,,,,		
			Yes	No
100	Does the organization have local chapters, branches, or affiliates?	10a		1
	·	.00		Ť
J	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10ь		
11	affiliates, and branches to ensure their operations are consistent with those of the organization?  Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	100		$\overline{}$
''	form?	11	1	ĺ
114	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		<u> </u>	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		•	
D	rise to conflicts?	12b	1	ĺ
			<del></del>	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	✓	
13	Does the organization have a written whistleblower policy?	13		1
14	Does the organization have a written document retention and destruction policy?	14		1
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?			
а	The organization's CEO, Executive Director, or top management official	15a		1
b	Other officers or key employees of the organization	15b		1
_	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			İ
	with a taxable entity during the year?	16a		✓
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
_	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			l
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c			
	available for public inspection. Indicate how you make these available. Check all that apply.	,, , <del>-</del> ,	.,,,	
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of inte	erest	
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rds of	the	
	organization: VICTOR LEE, TREASURER 16403 LIVINGSTON RD - ACCOKEEK, MD 20707 - 301-28			

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

### 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. Use Schedule J-2 if additional space is needed.

- 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. 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.

Check this box if the organization did not compensate any current officer, director, or trustee.										
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	Positi	on (		k all	that ap		Reportable	Reportable	Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
ROBERT STRIEGEL PRESIDENT	3/5									
ROBERT PITCHER	1/3			<b>√</b>						
VICE PRES MICHAEL GRISSER SECRETARY	1			<b>✓</b>						
VICTOR LEE TREASURER	3			1						

	(A) Name and title	(B) Average	Positi	/-		-			(D)	(E)	_	(F)	
	Name and the			(C) Position (check all that ap					Reportable	Reportable	Estimated		
NONE		hours per week	Individual trustee or director			Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organization:		of Ion Ion Ion Ion	
NONE				<del> </del>			Δ.	$\square$					
				<del> </del>									
		ì											
											<u> </u>		
					$\vdash$								
							ļ		-				
						<u></u>							
1b T	otal						1	<b></b>			<del>                                     </del>		
2 T	otal number of individuals (including but i	not limited					above	) wh	no received mo	ore than \$100,0	00 in		
	eportable compensation from the organiza	ation >										Yes	No
	Did the organization list any former office									ompensated	3		110
	employee on line 1a? If "Yes," complete S									on on the second			
t	For any individual listed on line 1a, is the same organization and related organizations and related organizations and vidual.	greater tha	n \$15	50,0	007	If "		con	nplete Schedu		4		
5 [	Old any person listed on line 1a receive services rendered to the organization? If "	or accrue	com	oen:	sati	on 1	from	any	unrelated org	anization for	5		
	on B. Independent Contractors												
	Complete this table for your five highest compensation from the organization.	ompensate	d ınd	epe	nde	ent d	contra	ictor	rs that receive	d more than \$1	00,000	of .	
	(A) Name and business add	fress							(B) Description of s	ervices	(C Compe		
								<u> </u>	·				
	· · · · · · · · · · · · · · · · · · ·							-					
								<del>  -</del>					
	Total number of independent contractors (in more than \$100,000 in compensation from					to	those	liste	ed above) who	received			

Par	t VIII	Statement of Re	venue						
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns		1a					
E a	b	Membership dues		1b				•	
īs,	С	Fundraising events .	•	1c					
ig is	d	Related organizations		1d					
as, Sim	е	Government grants (contri	butions).	1e	_				
e E	f	All other contributions, gifts, g	grants,						
흔들		and similar amounts not inclu							ľ
ξĒ		Noncash contributions include		1f. \$					
	<u> </u>	Total. Add lines 1a-1f	<del></del>	··	Business Code				
E S					Dusiness dode				
<u>§</u>	2a	•••••							<del></del>
Program Service Revenue	b	•••••							
	d								
	٦								
E B	f	All other program servi							
<u> </u>	g	Total. Add lines 2a-2f			<b>&gt;</b>		_		
	3	Investment income (incother similar amounts) Income from investment of			🕨	20,555	20 <b>.5</b> 55	·	
	5	Royalties							
	1		(i) Real		(ii) Personal				
	6a	Gross Rents	32	2,800					
	Ь	Less: rental expenses		0					
		Rental income or (loss)						:	
	d	Net rental income or (lo	· · · · · · · · · · · · · · · · · · ·		<u> ▶</u>	32,800	32,800		
	7a	Gross amount from sales of	(i) Securiti	es	(ii) Other				
		assets other than inventory	<del></del>	<del></del>					
	b	Less: cost or other basis							
	١ ـ	and sales expenses .							
		Gain or (loss) Net gain or (loss)			•				
Revenue		Gross income from	fundraisi	ng					
Vel		events (not including \$ of contributions reported							
_		See Part IV, line 18		. a.					
Other	ь	Less: direct expenses		_				!	
₹		Net income or (loss) fro			vents >				
	9a	Gross income from gam See Part IV, line 19							
	ь	Less: direct expenses.							
		Net income or (loss) fro							
	10a	Gross sales of inverteums and allowances			1,350				
	Ь	Less cost of goods so							
		Net income or (loss) from				-28	-28		
		Miscellaneous Rev			Business Code				
	11a	MISCELLANEOUS				31	31		<u> </u>
	b				<del></del>				<del></del> -
	C						-		
		All other revenue		•	L	24	<del> </del>		
		Total. Add lines 11a-1 Total revenue. See ins		•	💺	53,358	53,358	-	
	,· <del></del>	. Jan. 1040Had. Oct 1113			<u> </u>	J3,330	J3,330		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C),							
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(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						
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	11,247	11,247				
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	495	495				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)						
9	Other employee benefits						
10	Payroll taxes		<del></del>				
11	Fees for services (non-employees):						
	Management						
	Legal						
	Accounting				<del></del>		
d	, 9			W	<del></del> -		
	Professional fundraising services. See Part IV, line 17 Investment management fees						
	Other	1.650	2,650	· <del></del>			
12	Advertising and promotion	•	-,-				
13	Office expenses	1,965	1,965				
14	Information technology						
15	Royalties						
16	Occupancy	1,549	1,549				
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		20.450				
22	Depreciation, depletion, and amortization.	26,452 4,559	26,452 4.559				
23	Insurance	4,559	4.559		· · ·		
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)						
а	MISCELLANEOUS	137	137				
b	HEAT, LIGHT & POWER	2,656	2,656				
C	PHONE	290	290				
d	TRASH REMOVAL	767	767				
е	CABLE TV	994	994				
	All other expenses		<del></del>	<del></del>			
25_ 26	Total functional expenses. Add lines 1 through 24f  Joint costs. Check here ▶ ☐ if following						
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	52.855	52 855				

Part X	Balance Sheet			
		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	45,934	1	3,778
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key		1	
	employees, and highest compensated employees. Complete Part II of		ŀ	
	Schedule L	·-···	5	
6	Receivables from other disqualified persons (as defined under section			
	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
	Part II of Schedule L		6	
왕 7	Notes and loans receivable, net		7	
Assets a s	Inventories for sale or use		8	
<b>⋖</b> 9	Prepaid expenses and deferred charges		9	
10a	Land, buildings, and equipment: cost or 10a 878,660		1	
	other basis. Complete Part VI of Schedule D			
b	Less: accumulated depreciation 10b 123,496	781,616		755,164
11	Investments—publicly traded securities	534,870		617,210
12	Investments—other securities. See Part IV, line 11		12	
13	Investments—program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15 16	Other assets See Part IV, line 11	4 252 420	15 16	4 270 450
<del></del>		1,352,420	17	1,376,152
17	Accounts payable and accrued expenses		18	
18 19	Grants payable		19	
20	Deferred revenue		20	
	Escrow or custodial account liability Complete Part IV of Schedule D	- 7	21	
Liabilities 22	Payables to current and former officers, directors, trustees, key	·-		
ig -	employees, highest compensated employees, and disqualified		1	
3	persons. Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities. Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25		26	
ances 27	Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
[ 27	Unrestricted net assets		27	
മ് 28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
Net Assets or Fund Bal 33 33 33 55 56 57 57 57 57 57 57 57 57 57 57 57 57 57	Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
ಕ್ಟ್ 30	Capital stock or trust principal, or current funds		30	
ဖ္တိ 31	Paid-in or capital surplus, or land, building, or equipment fund	1,352,420	31	1,376,152
₹ 32	Retained earnings, endowment, accumulated income, or other funds		32	
2 33	Total net assets or fund balances	1,352,420	33	1,376,152
34	Total liabilities and net assets/fund balances	1,352,420	34	1,376,152

Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990:   Cash Cash Corual Cother HYBRID			
	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?	2a	✓	
b	Were the organization's financial statements audited by an independent accountant?	2b		1
С	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			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			İ
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		✓
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.	3b		

Form **990** (2009)

### **SCHEDULE O** (Form 990)

### **Supplemental Information to Form 990**

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990.

Name of the organization	Empl	oyer identification number
JFK ACCOKEEK CORPORATION	52	1327726
COPIES OF THE FORM 990, GOVERNING DOCUMENTS ARE MADE AVAILABLE FOR VIEW	NING	DURING REGULAR
•••••••••••••••••••••••••••••••••••••••		
Mours upon request.		
••••••		,
FORM 990 AND ATTACHMENT ARE PROVIDED TO THE BOARD MEMBERS FOR REVIEW.		
ORGAANIZATION DOES NOT HAVE A WHISTLEBLOWER POLICY.		
	<b>-</b>	
•••••	<b>-</b>	
······		

# SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

ernal Revenue Service	ime of the organization

JFK ACCOKEEK CORPORATION

Partl

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

nstructions.
See separate
. 880.
ich to Form

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33,

Open to Public Inspection 2010

OMB No. 1545-0047

Employer Identification number

(g) Section 512(b)(13) controlled entty? Schedule R (Form 990) 2010 (f)
Direct controlling entity Yes No Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) (f)
Direct controlling
entity (e) End-of-year assets (o)
Public charity status
(if section 501(c)(3)) (d) Total income (d) Exempt Code section 501(C(8) 501(C)(3) (c)
Legal domicile (state
or foreign country) Cat. No 50135Y (c) Legal domicile (state or foreign country) (b) Primary activity (b) Primary activity CHARITABLE FRATERNAL For Paperwork Reduction Act Notice, see the Instructions for Form 990. (1) JOHN F KENNEDY COUNCIL # 5482 KNIGHTS OF COLUMBUS (a) Name, address, and EIN of disregarded entity (3) JOHN F KENNEDY COUNCIL # 5482 CHARITIES INC (a) Name, address, and EIN of related organization 52-1658008 45-0528172 Part II **£** 8 € 9 Ξ 9 0 9 E 9

# JFK ACCOKEEK CORPORATION INC

**DEPRECIATION SCHEDULE** 

	BOOK VAL	77239.50 319993.50	38042.53 296004.71	2380.40	11037.93	2580.41	3540.00	900.00	648.00	2814.00	630.00	1834.00	49900.00 62900.00	755162.95
		77239.50	38042.53	544.60	2320.92	484.59	2360.00	600.00	432.00	536.00	270.00	666.00		123496.14 755162.95
	9/30/2008 9/30/2009 9/30/2010 ACCUM	13241.04	11134.04	97.50	427.28	102.00	590.00	150.00	108.00	134.00	135.00	333.00		26451.86
	9/30/2009	13241.04	11134.04	97.50	427.28	102.00	290.00	150.00	108.00	134.00	135.00	333.00		25981.74 26451.86
	9/30/2008	13241.04	11134.91	94.51	427.28	102.00	590.00	150.00	108.00	134.00	0.00	0.00		
PRIOR	ME' YRS YRS	30 37516.38	4639.54	255.09	1039.08	178.59	590.00	150.00	108.00	134.00	0.00	0.00		44610.68
	YRS	30	30	30	30	30	30	30	30	30	2	S		
	COST ME	1/1/2005 397233.00 SL	334047.24 SL	2925.00 SL	13358.85 SL	3065.00 SL	5900.00 SL	1500.00 SL	1080.00 SL	3350.00 SL	900.00 SL	2500.00 SL	49900.00 62900.00	878659.09
	IN SERV	1/1/2005	5/1/2007	1/1/2006	8/1/2006	1/1/2006	10/1/2006	10/1/2006	10/1/2006	10/1/2006	1/1/2009	2/1/2009		
•	NOI	16403 LIVINGSTON	16405 LIVINGSTON	SHED	PAVILION	AIR CONDITIONER	KITCHEN STOVE	PARKING LOT	HEAT PUMP	SEWER HOOKUP	CARPET	CARPET	16403 LIVINGSTON 16405 LIVINGSTON	
	A/C DISCRIPTION	101 BLDG.	102 BLDG.	103 IMPROV SHED									104 LAND	TOTALS