

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



## Form **990**

Department of the Treasury

**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)

2010

OMB No 1545-0047

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

Open to Public

		2010 cal	endar year, or tax year beginning , and ending					
				mplover identifi	cation number			
Tallighte of Selambed, Walter Foliard Council of to								
Address change    Doing Business As   Walter Pollard Council 5480   23-7137227     Name change   Number and street (or P O box if mail is not delivered to street address)   Room/suite   E Telephone number								
=	NT .							
<b>!</b>	nitial retu	ım	930-0491					
Terminated City or town, state or country, and ZIP + 4								
	mended	d return	Newport News VA 23606 G Gr	ross receipts \$	1,984,877			
	pplication	on pending	F Name and address of principal officer H(a) is this a gr	oup return for a	ffiliates? Yes X No			
			Chuck Olson 106 Onancock Way, Yorktown, VA 23693 H(b) Are all affil		X Yes No			
		pt status		tach a list (see				
		<u>:                                    </u>						
<u>1 M</u>	/ebsite	: ► Koto	5480.org H(c) Group exe	mption number	▶ 188			
ΚF	orm of o	rganization	X Corporation	1964 MS	tate of legal domicile			
Р	art l	Sui	mmary					
	1		escribe the organization's mission or most significant activities: Mission Statemer	nt- The miss	ion for			
		-	of Columbus Council Council 5480 is to put our faith into action through service					
eg	]		ns for our church, community, youth, family and council. In addition we shall provide					
Jan	İ		ns for the care of widows and children of deceased members in need. Our major					
Activities & Governance	,		his box I if the organization discontinued its operations or disposed of more than 25% of its nei	t accote				
တိ	2			1 1	0			
<b>ේ</b> ග	3		of voting members of the governing body (Part VI, line 1a)	3	. 0			
ij	4		of independent voting members of the governing body (Part VI, line 1b)	4	0			
Ę	5		imber of individuals employed in calendar year 2010 (Part V, line 2a).	. 5	0			
⋖	6		imber of volunteers (estimate if necessary)	6				
C/-	7a		related business revenue from Part VIII, column (C), line 12	7a	0			
<u> </u>	b	vet unre	elated business taxable income from Form 990-T, line 34	7b				
		04-1-	Prior		Current Year			
9	8		utions and grants (Part VIII, line 1h)	22,180	28,988			
ie.	9		n service revenue (Part VIII, line 2g)	0	0			
e e	10		ent income (Part VIII, column (A), lines 3, 4, and 7d)	37,555	35,008			
ے	11		evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .	232,000	166,733			
_	12_		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	291,735	230,729			
72	13		and similar amounts-paid (Part IX, column (A), lines 1–3).	0	0			
(	14		paid to or for members (Part IX, column (A), line 4)	0	0			
Expenses (	15	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	0			
SUS C	16a	Professi	nonal fundraising feest (Part IX) column (A) line 11e)	0	0			
Ŏ.	b	Total fur	ndraising expenses (Part IX, column (D), line 25)					
ш	17		kpenses (Part IX, column- <del>(A), lines 11a-11d 11f-24f</del> )	36,082	37,000			
	18		penses. Add lines 13–17 (must equal-Part IX,-column (A), line 25)	36,082	37,000			
	19	Revenu	e less expenses. Subtract line 18 from line 12 .	255,653	193,729			
Net Assets or Fund Balances			Beginning of the second	Current Year	End of Year			
sets	20		sets (Part X, line 16)	6,529	523			
A PE	21	Total lia	bilities (Part X, line 26)	0	0			
25	22_	Net ass	ets or fund balances Subtract line 21 from line 20	6,529	523			
Pa	rt II_	Sig	nature Block					
			y, I declare that I have examined this return, including accompanying schedules and statements, and to the be					
and t	elief, it i	s true, corre	ed, and complete Declaration of preparer (other than officer) is based on all information of which preparer has	any knowledge	-			
sign Joseph My der. 5/10/11								
Here Sgna			Signature of officer Loseph M. Drozdowski, Advocate	Date	•			
			Type or print name and title					
		Print	Type preparer's name Preparer's signature Date	Check	PTIN			
Pai		_	SELF-PREPARED RETURN	self-emp				
	parer	i						
Use	Only	, -		EIN P				
		Firm	's address ▶ Phone	no				
May	the IF	RS discus	ss this return with the preparer shown above? (see instructions)		. X Yes No			
			<del></del>					

_	990 (2010		23-7137227	Page 2
Pa	<u>irt IIIs</u>	· ·		_
		Check if Schedule O contains a response to any question in this Part III		. 📙
1	Briefly	describe the organization's mission.		
-		revious page mission statement, Raised over \$200,000 for charity with no paid members.		
2	Did th	e organization undertake any significant program services during the year which were not listed or		
2		or Form 990 or 990-EZ?	Yes	□No
		s," describe these new services on Schedule O.	162	
_				
3		e organization cease conducting, or make significant changes in how it conducts, any program	$\Box$ ,	<b>г</b>
		es?	Yes	No
_		s," describe these changes on Schedule O		
4		ibe the exempt purpose achievements for each of the organization's three largest program service		
		on 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the an	nount of grants an	d
	alloca	tions to others, the total expenses, and revenue, if any, for each program service reported.		
4a		e) (Expenses \$0 including grants of \$0 ) (Revenue		
		ions to Our Lady of Mount Carmel School AND church DONATIONS TO SCHOOL include funds		
	assist	ing needy students 2010 donations for 2010 exceeded \$90,000.		
	Donat	ions were made to support programs at St Jeromes Church. Donations exceeded \$27000		
	Donat	ions to St Vincents program to feed the hungry were made Donation was \$4,000		
	•			
4b	(Code	e: 0 including grants of \$ 0 (Revenue)	ue \$	0)
	Donat	ions were made to the Boy's and girls club Donation was \$2000		
	Donat	ions for community projects and the local military base were made. These exceeded \$10,000		
	The a	ttached budget shows where our donations went		
4c	(Code	) (Expenses \$ 0 including grants of \$ 0 ) (Revenue	ue \$	0)
•••	(0000	/ (Assessed 1		/
		••••••		
		•••••••••••••••••••••••••••••••••••••••		
	O#5 = ::	program anguage (Decembe in Sehadula O.)	<del></del>	
4d		program services (Describe in Schedule O )	<b>^</b> \	
		nses \$ 0 including grants of \$ 0 ) (Revenue \$	0)	
40	LOTAL			

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, Parts I and IV.  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, Parts II and IV.  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, Parts III and IV.  16 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 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 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?				Yes	No
2 Is the organization required to complete Schedule B, Schedule O Contributors? (see instructions).  2 In the organization engage in direct or midrect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II  3 Section 501(s) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax yea? If "Yes," complete Schedule C, Part II  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 98-1991 If "Yes," complete Schedule C, Part III  5 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 of the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II  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 III  7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  8 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV  10 Did the organization directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IVI  10 Did the organization answert or any of the following questions is "Yes," then complete Schedule D, Part IVI  11 If the organization report an amount for investments—program related in Part X, line 102 If "Yes," com			1		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 "Pes", complete Schedule C, Part II  4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(c)(4), 501(c)(5), organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  5 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II  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 III  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  9 Did the organization report an amount in Part X, line 121, 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  10 Did the organization orgont an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII  11 If the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part X II  12 Did the organization report an amount for other assets 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 X II  13 Did the organization separate, included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization report an amount for other labatities in Part X, line 18? "Yes," complete Schedule D, Part X II  14 Did the org					X
acandidates for public office? If "Yes," complete Schedule C, Part I  Section S01(s)(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  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 98-199" If "Yes," complete Schedule C, Part III  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 III  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 III  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  Did the organization report an amount for investments—other securities 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 10? If "Yes," complete Schedule D, Part VI  Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for other labitities in Part X, line 13 that is 5% or more of its total assests reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  Did the organization sibability for uncertain tax positions under If IN 48 (ASC 740)? If "Yes," complete Schedule D, Part X X 111  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," and If the organization menoted and in separ					
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assessments, or similar amounts as defined in Revenue Procedure 98-19? // "Yes," complete Schedule C, Part // 1 // 1 // 1 // 1 // 1 // 1 // 1 //			4		
assessments, or similar amounts as defined in Revenue Procedure 98-19? // "Yes," complete Schedule C, Part // 1 // 1 // 1 // 1 // 1 // 1 // 1 //	s th	ne organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
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Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.  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.  Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V.  If the organization, sanswer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII  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 VIII.  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 liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X III.  Did the organization spearate or consolidated financial statements for the tax year of the tax year? If "Yes," complete Schedule D, Part X III.  Did the organization or be a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E, Parts II and IV.  Did the organization maintain an office, employees, or agents outside of the United States?  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts II and IV.  Did the organization report			6_		X
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X: or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.  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 V.  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.  2 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII 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 VIII c Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part VIII c Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part VIII c 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 (ASC 740)? If "Yes," complete Schedule D, Part X organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X, vali it the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts X, vali it the organization answered "No" to line 12a, then completing Schedule D, Part X, vali validate organization answered "No" to line 12a, then completing Schedule D, Parts X, vali, and xIII is optional 12a.  12a 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, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,			8		Х
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Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II			17	Х	L
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			18		Х
If "Yes," complete Schedule G, Part III		4. # 14.04.44.00.48	19		Х
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H					X
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some		· · · · · · · · · · · · · · · · · · ·			
Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) 20b			20b		

	•		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		X
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		X
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			v
24-	employees? If "Yes," complete Schedule J	23		Х
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		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		
	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	200		·
_	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			
27	disqualified person outstanding as of the end of the organization's tax year? <i>If</i> "Yes," complete Schedule L, Part II.  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	26		X
27	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		Х
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)	م مینده د	2	
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
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N,</i>	30		
•	Part I	31		Х
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		х
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? If "Yes," complete Schedule R, Part I	33		X
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		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		x
	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			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
37	organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36	X	
Ji	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		Х
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		

Part V	Statements Regarding Other IRS Filings and Tax Compliance
	Check if Schedule O contains a response to any question in this Part V

	Officer in Octional Contains a response to any question in this Fart V		<u> </u>	<u> </u>
	5-t		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	-		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			-
2-	gaming (gambling) winnings to prize winners?	1c		
2a	Statements, filed for the calendar year ending with or within the year covered by this return  2a			į
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	~ -	<u> </u>
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20		-
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		t
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	_	X
b	If "Yes," enter the name of the foreign country: >			
	See instructions for 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		<u> </u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		ļ
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<del> </del>
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		<del>                                     </del>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	C.		
7	Organizations that may receive deductible contributions under section 170(c).	6b		<del>                                     </del>
и а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	7a		<del> </del>
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			<del> </del>
_	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization 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	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? .	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		ļ
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			}i
_	organization, have excess business holdings at any time during the year?	8		<del>                                     </del>
9	Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?	90		
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		<del>                                     </del>
10	Section 501(c)(7) organizations. Enter	30		
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 . 10b	_		1 1
11	Section 501(c)(12) organizations. Enter.			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			,
	against amounts due or received from them )			L .,
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	4		l
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	15		<del>                                     </del>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<del>                                     </del>
L	Note. 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 the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	$\dashv$		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<del> </del> '
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		†
			990	(2010)
				/

Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below			
	for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chang	es ın		
•	Schedule O. See instructions			_
	Check if Schedule O contains a response to any question in this Part VI			
Sect	ion 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 1a 1			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b	1 1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1		,
	any other officer, director, trustee, or key employee?	2	_	X
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?	3	Х	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		$\vdash$
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	_	$\vdash$
6	Does the organization have members or stockholders?	6	X	$\vdash$
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			$\vdash$
ı a	of the governing body?	7a		x
_		7b	Х	<del>  ^-</del> -
_	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	<u>/ b</u>		<del></del>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
a	The governing body?	8a	X	—
b	Each committee with authority to act on behalf of the governing body?	8b	<u> X</u>	<del></del>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			١.,
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	<u>_9</u> _		<u> </u>
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	ode)		
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		<u> </u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	1		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		X
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11a		_X_
b	, , , , , , , , , , , , , , , , , , ,	<u></u>		
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		_X_
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		<u> </u>
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		<u> </u>
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		Х
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		
b	Other officers or key employees of the organization	15b		
	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?	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			
	the organization's exempt status with respect to such arrangements?	16b		i'
Sect	ion 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)(3)s o	nlv)		
	available for public inspection Indicate how you make these available Check all that apply.	''7/		
	Own website Another's website Upon request			
10		ct		
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interepolicy, and financial statements available to the public.	<b>ા</b>		
20		_		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	е		
	organization. ▶			

Form 990 (2010)	Knights of Columbus,Walter Polla	rd Council 5480	)							23-71372	227	Page 7
Part VII	Compensation of Officers, Dire	ctors, Trustee		ey	En	plq	oyee	s, I	Highest Comp			, age i
	Employees, and Independent C Check if Schedule O contains a re		v ane	estic	on i	n th	nis P	art	VII			
Section A.	Officers, Directors, Trustees, Key I									<u></u>		<u> </u>
	this table for all persons required to be	e listed Report	comp	ens	atio	on fo	or the	ca	lendar year end	ing with or withir	1 the	
organization's  • List all	s tax year of the organization's <b>current</b> officers, (	directors, truste	es (w	het	her	ındı	ıvıdua	als o	or organizations)	), regardless of	amount	
of compensa	tion Enter -0- in columns (D), (E), and	(F) if no compe	nsatı	on v	vas	pai	id.			_		
<ul> <li>List the who received</li> </ul>	of the organization's current key emple organization's five current highest coll reportable compensation (Box 5 of Folland any related organizations.	mpensated em	ploye	es (	(oth	er t	han a	n o	fficer, director, t	rustee, or key e		<del>)</del> )
	of the organization's <b>former</b> officers, kerportable compensation from the organization								ed employees w	ho received moi	e than	
	of the organization's former directors more than \$10,000 of reportable comp										e of the	
_	in the following order individual trustee			-				-	-			
_ `	d employees, and former such persons											
X Check th	us box if neither the organization nor an	ny related organ (B)	nzatio	on c		pen C)	sate	ar ar	(D)	r — — — — — — — — — — — — — — — — — — —	stee.	
	Name and Title	Average	Posit	ion (			that ap	_	Reportable	(E) Reportable	Estin	nated
		hours per week (describe hours for related organizations in Schedule O)	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)	oth compe from organ and re	unt of her nsation n the ization elated zations
(1) John E	dwards, Grand Knight, 757-876-8386	12		Ì	х				0	0		(
(2) Carroll 757-9303559	Kelly,Deputy Grand Knight,	12.			х							_
(3) Harold	Hairston ,Chancellor	6			х							
(4) Tony M	feredino,Treasurer	6.			х							
( <b>5</b> ) Ron M	essier,Financil Secy,757-595-0048	6			X							
		, ,						-				
(7)								-				
				-						-		
<u>(9)</u>								-				
(10)												
(11)								-				<del></del>
(12)												
(13)				$\vdash$	├─	$\vdash$	$\vdash$	╁─	<del>                                     </del>	-	<del> </del>	

(15)

	9	9 712	7227		<b>S</b>				
_	23-7137227 Page 8 Employees (continued)								
	(E) Reports compens from reports organiza (W-2/1099	ible ation ated tions	com fi org	(F) stimate mount of other inpensal rom the ganization	of tion e on ed				
				·					
			_						
			<u> </u>	<del></del>					
				-					
	i 								
)		0			0				
1		0		-	0				
;	100,000 וו	<u>0</u> n			0				
				Yes	No				
(	t		3						
•	om								
5	such 		4		X				
r	ndividual		5		X				
ı	an \$100,0	000 of							
r	vices	C	(C Compe	s) nsation					
		I			^				

Р	art VII Section A. Officers, Directors,	Trustees, Key E	mplo	yee	s, a	nd	High	est	Compensated	Employee	s (co	ntınue	ed)	<u> </u>
	(A) (B) (C) (D)  Name and title Average Position (check all that apply) Reportable			(E)			(F)							
	Name and title	Average hours per week (describe hours for related organizations in Schedule O)	or director		Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportab compensat from relati organizatic (W-2/1099-M	on ed ons	com fr org and	stimate nount of other pensate om the anizate d relate anization	of tion tion tion ed
(17)				-										
<u>(18)</u>														
<u>(19)</u>														
(20)														
(21)														
(22)														
(23)					-									
(24)														
(25)														
(26)														
(27)														
(28)														
1b	Sub-total							•	0		0			0
c d	Total from continuation sheets to Part VII  Total (add lines 1b and 1c)							. •	0		0 0			<u>0</u> 0
2	Total number of individuals (including but no	t limited to those					ho re	<u> </u>	ed more than \$	100,000 in				
	reportable compensation from the organizat	ion			0_								1	
3	Did the organization list any <b>former</b> officer, employee on line 1a? <i>If "Yes," complete Sci</i>					yee	, or h	ighe	est compensate	d		3	Yes	
4	For any individual listed on line 1a, is the su					· nan	d oth		· · · · · · · · · · · · · · · · · · ·	om		-3-		Х
•	the organization and related organizations g	•	•						•			4		X
5	Did any person listed on line 1a receive or a for services rendered to the organization? If									ndividual		5		Х
Sec	ction B. Independent Contractors									<u>-</u>				
1	Complete this table for your five highest concompensation from the organization.	npensated indepe	ender	nt co	ntra	acto	rs th	at re	eceived more th	an \$100,00	0 of			_
	(A) Name and business a	ddress							(B) Description of ser	vices	C	(C Comper		_
	<u>-</u>							<u> </u>						0
														0
	<del>-</del>				_			├-	<del></del>	<del></del>				0 0
														0
2	Total number of independent contractors (in more than \$100,000 in compensation from t	_	mited	to t	hos	e lis	sted a		ve) who receive	d				

Form 990 (2010)

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## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns			
other amenizations must complete column (A) but are not required to complete columns	/B) //	^) or	nd IT

•	All other organizations must complete column (A	A) but are not requir	ed to complete col	umns (B), (C), and (	(D).
	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	0			
2	Grants and other assistance to individuals in			:	
	the U.S See Part IV, line 22	0			·
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members .	0	·		
5	Compensation of current officers, directors,				
	trustees, and key employees .	0			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions).	0			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees):				
а	Management	. 0			
b	Legal	0			
С	Accounting	0			
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17 .	0			
f	Investment management fees	0			
g	Other	0			
12	Advertising and promotion .	0			
13	Office expenses	0			
14	Information technology	0			<u> </u>
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	l o			
19	Conferences, conventions, and meetings	2,100			
20	Interest	0			
21	Payments to affiliates	4,500			<u> </u>
22	Depreciation, depletion, and amortization .	0	0	0	0
23	Insurance	0			
24	Other expenses. Itemize expenses not covered				1
	above (List miscellaneous expenses in line 24f. If				,
	line 24f amount exceeds 10% of line 25, column				
	(A) amount, list line 24f expenses on Schedule O)			<u> </u>	
а	Newsltters	8,000			
b	Appreciation Night Programs	9,000			
С	Youth Programs	2,500			
d	Postage	2,100			
е	Council Programs	7,600			
f	All other expenses degrees,retention,etc	1,200			
25	Total functional expenses. Add lines 1 through 24f	37,000	. 0	0	0
26	Joint costs. Check here ▶ if following				
	SOP 98-2 (ASC 958-720) Complete this line				
	only if the organization reported in column				
	(B) joint costs from a combined educational				
	campaign and fundraising solicitation				

Part X Balance Sheet (A) (B) Beginning of year End of year 1 Cash—non-interest-bearing 6.529 2 Savings and temporary cash investments . . 2 523 3 Pledges and grants receivable, net . . . 3 0 4 Accounts receivable, net ol 0 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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) 6 Notes and loans receivable, net . . . 7 8 Inventories for sale or use 8 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D **b** Less accumulated depreciation . 10c 10b 0 11 Investments—publicly traded securities . . . 11 0 12 ol 12 0 Investments—other securities See Part IV, line 11 ol 13 Investments—program-related See Part IV, line 11 13 0 Intangible assets . . . . . . ol 14 14 0 15 Other assets See Part IV, line 11 0 15 0 16 Total assets. Add lines 1 through 15 (must equal line 34) 6,529 16 523 17 Accounts payable and accrued expenses . 17 18 18 Grants payable. 19 Deferred revenue 19 Tax-exempt bond liabilities . 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties . . . Ol 24 0 25 Other liabilities. Complete Part X of Schedule D . . . Ol 25 Total liabilities. Add lines 17 through 25. 0 26 Organizations that follow SFAS 117, check here ▶ | | and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 28 Temporarily restricted net assets . 28 Permanently restricted net assets . . . . 29 29 Organizations that do not follow SFAS 117, check here ► X and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds. 696.992 30 31 Paid-in or capital surplus, or land, building, or equipment fund. 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances 696,992 33 765,594 Total liabilities and net assets/fund balances . 696,992 765,594

Form 5	990 (2010) Knights of Columbus, Walter Pollard Council 5480	23-7	137227	Pag	je 12
Par	t XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response to any question in this Part XI.	• •	<u> </u>	[	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		233	,276
2	Total expenses (must equal Part IX, column (A), line 25)	2			,000
3	Revenue less expenses Subtract line 2 from line 1	3			,276
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			,992
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-	
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		893	3,268
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII.			. [	
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				ļ ,
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? .		2a		_X_
b	Were the organization's financial statements audited by an independent accountant?		2b		X
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 it	ı			
	Schedule O				
d	the second and the se		li	l	İ
	issued on a separate basis, consolidated basis, or both				l
	Separate basis Consolidated basis Both consolidated and separate basis				
3a	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					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2010)

## **SCHEDULE G** (Form 990 or 990-EZ)

Supplemental Information Regarding **Fundraising or Gaming Activities** 

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

► Attach to Form 990 or Form 990-EZ. ► See separate instructions

Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number Knights of Columbus, Walter Pollard Council 5480 23-7137227 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Part I Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants а Internet and email solicitations Solicitation of government grants b Phone solicitations X Special fundraising events c X In-person solicitations d Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or 2a key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (v) Amount paid to (III) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) (ii) Activity custody or control of (or retained by) or entity (fundraiser) from activity fundraiser listed in contributions? organization col (i) Yes No 1 Knights of Columbus Council 5480 Х 1.918.334 1,751,601 166.733 2 0 0 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 10 0 0 Total 1,918,334 1,751,601 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b List events with gross receipts greater than \$5,000 (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col (a) through col (c)) (event type) (event type) (total number) Gross receipts. 0 0 Less Charitable contributions 0 3 Gross income (line 1 minus line 2) 0 0 0 0 Cash prizes . 0 0 Noncash prizes 0 0 0 0 Direct Expenses Rent/facility costs 0 0 0 0 Food and beverages . 0 0 Entertainment 0 0 Other direct expenses Direct expense summary Add lines 4 through 9 in column (d). 0) Net income summary. Combine line 3, column (d), and line 10. Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming col (a) through col (c)) bingo/progressive bingo Gross revenue 0 Direct Expenses 2 Cash prizes . 0 Noncash prizes . 0 Rent/facility costs. Other direct expenses Yes Yes % Yes No Volunteer labor . Direct expense summary Add lines 2 through 5 in column (d) 0) Net gaming income summary Combine line 1, column d, and line 7. Enter the state(s) in which the organization operates gaming activities: b If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . **b** If "Yes," explain:

Schedu	ule G (Form 990 or 990-EZ) 2010 Knights of Columbus, Walter Pollard Council 5460	<u>23-</u>	7137	227	Page 3
11	Does the organization operate gaming activities with nonmembers?		Y	res 🗌	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	. [	<u></u>	′es [	No
13	Indicate the percentage of gaming activity operated in.	Ī			_
а		13a			%
b	•	13b			%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records.	į			
	Name ▶ James Hooker				
	Address ► 100 Columbus Way Newport News, VA 23606				
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	1	<u></u>	∕es [	X No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ 0 and the				
С	amount of gaming revenue retained by the third party ► \$0  If "Yes," enter name and address of the third party:				
	Name ▶	·			
	Address ►				
16	Gaming manager information				
	Name ▶ James Hooker		<i>-</i> -		
	Gaming manager compensation > \$0				
	Description of services provided ▶ game manager			<b></b>	
	X Director/officer Employee Independent contractor				
17	Mandatory distributions.				
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	1	_	_	_
	retain the state gaming license?		X Y	ſes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations				0
Part	or spent in the organization's own exempt activities during the tax year   Supplemental Information. Complete this part to provide the explanations required by Pa (III) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also complete provide any additional information (see instructions)				olumns
_	provide any additional morniation (see instructions)				
					<b>-</b>
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		· <b></b>			
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		,			
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10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	$\vdash$				2010-2011	Last Quarter	
2	-		Charity Expenses	Description	Proposed	Proposed	
2	Щ.			Misc. funds for Church Requests	\$ 1,000.00	\$	
20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ļ Щ	Γ	s Recognition	Party to recognize efforts of altar servers		\$ 200.00	
6 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Ų		eakfasts	Pancake Breakfast Supplies - All Events	\$ 1,000.00	Done	
6 6 7 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ļ		plies	Make Rosaries to donate to Charity		\$	
6	ļ W		urch (Smithfield)			ક	
20 21 21 21 21 21 22 22 23 23 23 33 33 33 33 33 33 33 34 36 36 36 37 37 37 37 37 37 37 37 37 37 37 37 37	بيارا		Ition (17.5% of BINGO Fund Raising)		4		
8 8 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	ļ Į	Π				Done	
9 11 11 11 11 11 11 11 11 11 11 11 11 11	ļ ļ	Г	ogram (Food Pantry)			\$	
10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ı u	1					
11	ļ ŲŲ	1	inet	Fall Banquet & Spring Auction	\$ 2,000.00		
13	ı u	1	ment		ļ	- \$	
13 13 13 13 13 13 13 13 13 13 13 13 13 1	ļ	Т	stance		ļ		
16 14 14 15 16 17 18 18 18 18 18 18 18 18 18 18 18 18 18	ı L	Τ	ovation - \$73,000 Balance after 09-10 FY		\$ 20,000.00	- € <del>?</del>	
16 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 114	1	Peace (Ft. Eustis)		2	<del>69</del>	
16 17 17 17 17 18 18 18 18 18 18 18 18 18 18 18 18 18	ı lu	T	arty	ŧ		\$ 250.00	
10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ļЩ	1		Benefit Dinner & Spring Auction	\$ 2,000.00	Done	
19	ı u	Т	ub (17.5% of BINGO Fund Raising)		\$ 40,250.00	\$ 7,000.00	
19 19 19 19 19 19 19 19 19 19 19 19 19 1	ı I II.	T	Sellence Fund (Carpenito Scholarship)	Award for PCHS Teacher of the Year	\$ 500.00	\$ 500.00	
40 39 38 34 33 37 38 38 38 38 38 38 38 38 38 38 38 38 38	JЦ		tance		2	-	
21	ı LL				\$ 5,000.00	┼	
23	ılu,		Caring ministry-FISH (Food Pantry)		\$ 2,000.00	\$ 1,000.00	
23	1 14	1			\$ 1,000.00	49	
24 27 28 29 33 33 33 34 35 36 37 37 40 40 40 40 40 40 40 40 40 40 40 40 40	ı w	1."	Sea School			\$	
25 27 28 33 33 33 33 34 35 36 37 37 40 40 40 40 40 40 40 40 40 40 40 40 40	ļų.	Ø	Back Door Ministry		\$ 1,000.00	<del>69</del>	
26 27 27 28 33 33 33 33 34 34 35 36 37 37 38 38 38 38 38 38 38 38 38 38 38 38 38	Щ	S				Н	
27 28 33 33 33 33 33 34 34 35 40 40 40	Щ	1	ļa,	Misc. funds for Community Requests	۴,	\$	
28 33 33 33 34 40 40 39 88 88 44 98 88 88 88 88 88 88 88 88 88 88 88 88	ļ.	1	Spot		\$ 200.00		
29 33 33 34 35 37 38 38 38 40 40	ļ Ш		Yates Elementary			8	
35 33 33 33 34 40 39 38 34 39 38 34 39 38 34 34 36 36 36 36 36 36 36 36 36 36 36 36 36	ш		on Wheels (Thanksgiving)		-	_	
32 33 34 35 34 33 35 34 40 39 38 34 35 34 35 35 35 35 35 35 35 35 35 35 35 35 35	Ш	Γ	ula Rescue Mission	Rescue Mission/Shelter		$\dashv$	
40 33 33 33 33 33 34 33 35 34 35 35 35 35 35 35 35 35 35 35 35 35 35	Ш		ncis Ice Cream Social			- +	
33 37 38 38 44 39 39 39 39 39 39 39 39 39 39 39 39 39	Ш		/ille House				
33 33 34 35 34 36 36 36 36 36 36 36 36 36 36 36 36 36	ш		)rive				
35 37 38 39 40	Ш		rt News Mayor's Charity			_	
36 38 38 40 40	Ш		f VA Pen. Golf Tournament / Steak & Burger		7,	Done	
38 39 40	Ш				\$ 250.00	69	
38 40	Ш		Appreciation Day			\$	
39	ш		soc8K Charity Run	Donation to AHA beyond proceeds from race		+	
40	ш				\$ 1,200.00	8	
	Ш		Awards	Donation to recipents charity of choice		-	
CE   41   Mary immaculate Hospital (Last Resort Fund)	Ш	41 Mary Immaculate H	ospital (Last Resort Fund)		\$ 500.00	٠ ج	

( ).

			2010-2011	Last Quarter	
	Chanty Expenses	Description	Proposed	┝	 
42	KÖVAR	Donation to KOVAR Program	\$ 500000	6	
£	KOVAR Expenses	Cost to purchase mat'l for KOVAR Drive		65	
4	Poor Clares	Donation to Poor Clares Convent		-	
45	Refugee & Immigration Settlement of Richmond. Diocese	Hampton Roads Region		Done	
8	Council Catholic Education Endowment Fund		10	+	
47	YMCA (Newport News) Strong Community Campaign	Promotes Healthy Eating at Home		69	
8	Facility Usage-Churches	\$1400 x No. of Rentals	4	+	
₽	Facility Usage City of Newport News	\$1400 x No. of Rentals		┿	
S	Facility Usage-Polling Location	\$700 x No. of Rentals		┿	
51	Prolifie Adivities	Bus Trip, Newspaper Support, Etc.		-	
22	Scouts- Boy Scout Troop 242			_	
R	Virginia Knight of Columbus Charities, Inc. (VKCCI)			9 (	
7	Vocations - Penny a Knight a Day (PKD):			£	
3 3	Vocations Vocations Find (DS) (1)		\$ 1,750.00	0 3 1,750.00	
3 8	Vocaligits - Vocalidits Fulld (NOVP)		\$ 2,400.00	00.008 \$ 0	
8	Noice - Reep Const in Constmas (Cards)		\$ 800.00	Done	
2	Scorpion Memorial Service		\$ 400.00	200.00	
8	Contingency Fund		9	s	
23	Supreme Assesment Fund (\$3.00 per Member)	Funds for Defend Culture of Life Program	\$ 2,100.00	\$	
9	Habitat for Humanity New Line Item	Lunch for HFH Workers	\$ 250.00	Done	
61	Relay for Life - New Line Item	Seed money for RFL team fund raisers		-	
62	Muscular Distrophy - New Line Item		}	-	
	TOTAL		236	+	
	FUNDS AVAILABLE				
			1		

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