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Form **990****Return of Organization Exempt From Income Tax**

OMB No 1545-0047

2011Department of the Treasury
Internal Revenue ServiceUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)**Open to Public
Inspection**

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

A For the 2011 calendar year, or tax year beginning**2011, and ending**

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization POLISH COMMUNITY CENTER OF BUFFALO, INC.		D Employer Identification Number 16-1067572
	Doing Business As		E Telephone number (716) 893-7222
	Number and street (or P.O. box if mail is not delivered to street addr) 1081 BROADWAY		Room/suite
	City, town or country BUFFALO		State ZIP code + 4 NY 14212
F Name and address of principal officer JAMES CHLEBOWY 1081 BROADWAY BUFFALO NY 14212			G Gross receipts \$ 3,497,779.
H(a) Is this a group return for affiliates? ☐ Yes ☒ No			
H(b) Are all affiliates included? ☐ Yes ☐ No If 'No,' attach a list (see instructions)			
H(c) Group exemption number ▶			
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () (insert no) ☐ 4947(a)(1) or ☐ 527			
J Website: ▶ N/A			
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶		L Year of Formation 1976	M State of legal domicile NY

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>WEATHERIZATION OF HOMES, SENIOR SERVICES, PROVIDE HOUSING AND HUMAN SERVICES TO THE RESIDENTS OF THE SURROUNDING COMMUNITY.</u>		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	74
	6 Total number of volunteers (estimate if necessary)	6	50
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b Net unrelated business taxable income from Form 990-T, line 34	7b		
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	2,999,260.	3,172,179.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	63,079.	53,418.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	234,031.	8,786.
	12 Total revenue (add lines 8 through 11) (must equal Part VIII, column (A), line 12)	263,396.	3,497,779.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,296,370.	
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
	16a Professional fundraising fees (Part IX, column (A), line 11e)	2,135,244.	2,113,426.
Expenses	b Total fundraising expenses (Part IX, column (D), line 25) ▶		0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	1,329,349.	1,671,459.
	19 Revenue less expenses. Subtract line 18 from line 12	3,464,593.	3,784,885.
		-168,223.	-287,106.
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	4,737,985.	4,571,946.
	22 Net assets or fund balances Subtract line 21 from line 20	3,876,029.	3,997,096.
		861,956.	574,850.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer: <u>Marie R. W. Schumacher</u>		Date: <u>9/5/12</u>
	Type or print name and title: <u>Marie A. Wacobowski, Executive Director</u>		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	PG SIPPEL, CPA	PG SIPPEL, CPA	08/31/12
	Firm's name ▶ <u>BATT, HULTMAN & SIPPEL, CPA's LLC</u>	Check ☒ if self-employed	PTIN <u>P00227814</u>
	Firm's address ▶ <u>5500 MAIN ST, SUITE 208 WILLIAMSVILLE NY 14221-6755</u>	Firm's EIN ▶ <u>01-0563702</u>	Phone no <u>(716) 626-1299</u>

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No**BAA For Paperwork Reduction Act Notice, see the separate instructions.**

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Form **990** (2011)

SCANNED SEP 27 2012

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Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☒

- 1 Briefly describe the organization's mission:

WEATHERIZATION OF HOMES,
SENIOR SERVICES, PROVIDE HOUSING AND HUMAN SERVICES
TO THE RESIDENTS OF THE SURROUNDING COMMUNITY.

- 2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
- ☐
- Yes
- ☒
- No

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?
- ☐
- Yes
- ☒
- No

If 'Yes,' describe these changes on Schedule O.

- 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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.

4a (Code:) (Expenses \$ 889,304. including grants of \$ 0.) (Revenue \$ 788,089.)

WEATHERIZATION - THE ORGANIZATION MAKES ENERGY EFFICIENT REPAIRS TO HOMES
FOR AREA RESIDENCE WHO MEET LOW INCOME GUIDELINES.

4b (Code:) (Expenses \$ 129,615. including grants of \$ 0.) (Revenue \$ 152,546.)

NEIGHBORHOOD PRESERVATION - THE ORGANIZATION PROVIDES FINANCIAL ASSISTANCE
AND TRAINING SEMINARS FOR LOW INCOME RESIDENCE LOOKING TO BUY OR
REPAIR HOMES IN THE COMMUNITY.

4c (Code:) (Expenses \$ 550,427. including grants of \$ 0.) (Revenue \$ 528,582.)

YOUTH & SENIOR SERVICES - THE ORGANIZATION PROVIDES VARIOUS SERVICES TO
LOCAL AREA YOUTH AND SENIORS, INCLUDING AFTER SCHOOL EDUCATIONAL PROGRAMS,
HIGH SCHOOL EQUIVALENCY (GED) COURSES, COMPUTER TRAINING, AND
RECREATIONAL AND SOCIAL ACTIVITIES.

- 4d Other program services (Describe in Schedule O.)

(Expenses \$ 2,067,818. including grants of \$ 0.) (Revenue \$ 1,677,771.)

4e Total program service expenses 3,637,164.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
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		X
4 Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III		
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I		X
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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		X
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		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V		X
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		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	X	
b Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII		X
c 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		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X		X
f 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		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV		X
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		X
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		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II		X
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		X
20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part 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? <i>If 'Yes,' complete Schedule I, Parts I and II</i>		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? <i>If 'Yes,' complete Schedule I, Parts I and II</i>		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 employees? <i>If 'Yes,' complete Schedule J</i>		X
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, and that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?		
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? <i>If 'Yes,' complete Schedule L, Part I</i>		X
25b 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? <i>If 'Yes,' complete Schedule L, Part I</i>		X
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? <i>If 'Yes,' complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III</i>		X
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)		
28a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
28c 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? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>		X
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>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>		X
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>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		X
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? <i>If 'Yes,' complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

BAA

Form 990 (2011)

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

	Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	0	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X
2 a 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.	74	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	X	
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b If 'Yes,' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	X	
4 a 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)?		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		
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		
6 a 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?		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7 Organizations that may receive deductible contributions under section 170(c).		
a 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?		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		X
9 Sponsoring organizations maintaining donor advised funds.		
a Did the organization make any taxable distributions under section 4966?		X
b Did the organization make a distribution to a donor, donor advisor, or related person?		X
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12	10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders	11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
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	13b	
c Enter the amount of reserves on hand	13c	
14 a Did the organization receive any payments for indoor tanning services during the tax year?		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b	

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI

☒**Section A. Governing Body and Management**

- 1 a** Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.
- 1 b** Enter the number of voting members included in line 1a, above, who 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?
- 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?
- 4** Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?
- 5** Did the organization become aware during the year of a significant diversion of the organization's assets?
- 6** Did the organization have members or stockholders?
- 7 a** Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?
- b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?
- 8** Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:
- a** The governing body?
- b** Each committee with authority to act on behalf of the governing body?
- 9** Is there any officer, director or 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.

	Yes	No
1 a		13
1 b		13
2		X
3		X
4		X
5		X
6		X
7 a		X
7 b		X
8 a	X	
8 b	X	
9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

- 10 a** Did the organization have local chapters, branches, or affiliates?
- b** If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?
- 11 a** Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?
- b** Describe in Schedule O the process, if any, used by the organization to review this Form 990.
- 12 a** Did the organization have a written conflict of interest policy? If 'No,' go to line 13.
- b** Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
- c** Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done.
- 13** Did the organization have a written whistleblower policy?
- 14** Did the organization have a written document retention and destruction policy?
- 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?
- a** The organization's CEO, Executive Director, or top management official
- b** Other officers of key employees of the organization
- If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)
- 16 a** Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?
- b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

	Yes	No
10 a		X
10 b		
11 a	X	
12 a	X	
12 b	X	
12 c	X	
13		X
14		X
15 a		X
15 b		X
16 a		X
16 b		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed. New York
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
- ☐ 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 interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
- RONALD PARYLO 1081 BROADWAY, BUFFALO NY 14212 (716) 893-7222

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1 a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Hastings, Kitty Board	2.00	X						0.	0.	0.
(2) Butler, Douglas Treasurer	2.00	X		X				0.	0.	0.
(3) Chlebowy, James Chairperson	5.00	X		X				0.	0.	0.
(4) Dudek, Edward Board	2.00	X						0.	0.	0.
(5) Farrow, Linda Vice chairperson	2.00	X		X				0.	0.	0.
(6) Juncewicz, Annette secretary	10.00	X		X				0.	0.	0.
(7) Christine Raczka Board	2.00	X						0.	0.	0.
(8) Swinnich, Janice Board	2.00	X						0.	0.	0.
(9) Tweedy, Judy Board	2.00	X						0.	0.	0.
(10) Pfaff, David Board	2.00	X						0.	0.	0.
(11) Zacharek, Zoe Board	2.00	X						0.	0.	0.
(12) Dr Zulkarnain Board	2.00	X						0.	0.	0.
(13) Cieslak, Irene Board	2.00	X						0.	0.	0.
(14) _____										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (cont)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Sch O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) _____										
(16) _____										
(17) _____										
(18) <u>Marlies Wesolowski</u> <u>Executive Director</u>	40.00				X	X		63,625.	0.	0.
(19) <u>Ron Parylo</u> <u>Controller</u>	40.00					X		49,037.	0.	0.
(20) _____										
(21) _____										
(22) _____										
(23) _____										
(24) _____										
(25) _____										
1 b Sub-total								112,662.	0.	0.
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								112,662.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
CALABRESE 21 LUDWIG AVE CHEEKTOWAGA NY 14227	GENERAL CONTRACTOR FOR APTMENTS	197,389.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 1

Part VIII Statement of Revenue

			(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				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	2,860,041.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	312,138.			
	g Noncash contributions included in lns 1a-1f \$					
	h Total. Add lines 1a-1f		3,172,179.			
PROGRAM SERVICE REVENUE		Business Code				
	2a APARTMENT MANAGEMENT	531110	12,320.	0.	0.	12,320.
	b COMMISSIONS	531310	41,098.	0.	0.	41,098.
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		53,418.			
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)		8,786.	0.	0.	8,786.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real (ii) Personal				
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)		200,449.	0.	0.	200,449.
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b Less: cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)					
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a				
	b Less: direct expenses	b				
	c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances	a				
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11a MISCELLANEOUS	900099	62,947.	0.	0.	62,947.	
b						
c						
d All other revenue						
e Total. Add lines 11a-11d		62,947.				
12 Total revenue. See instructions		3,497,779.	0.	0.	325,600.	

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), and (D).

Check if Schedule O contains a response to any question in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 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 United States See Part IV, line 21				
2 Grants and other assistance to individuals in the United States See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,734,784.	1,640,458.	94,326.	0.
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	378,642.	363,363.	15,279.	0.
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees).				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion	3,644.	3,586.	58.	0.
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	107,599.	107,463.	136.	0.
17 Travel	21,589.	20,646.	943.	0.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	5,811.	4,767.	1,044.	0.
20 Interest	4,967.	4,967.	0.	0.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	253,840.	253,840.	0.	0.
23 Insurance	39,057.	39,057.	0.	0.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>REPAIRS & MAINT.</u>	157,749.	148,480.	9,269.	0.
b <u>SUBCONTRACTS</u>	233,953.	232,471.	1,482.	0.
c _____				
d <u>SUPPLIES</u>	40,455.	38,620.	1,835.	0.
e All other expenses	802,795.	779,446.	23,349.	0.
25 Total functional expenses. Add lines 1 through 24e	3,784,885.	3,637,164.	147,721.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash – non-interest-bearing	760,096.	1	522,186.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	52,278.	3	152,898.
	4 Accounts receivable, net	2,181.	4	1,595.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 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	
	7 Notes and loans receivable, net	12,705.	7	360.
	8 Inventories for sale or use	36,058.	8	94,323.
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,946,013.		
	b Less accumulated depreciation	10b 1,245,429.	3,774,667.	10c 3,700,584.
	11 Investments – publicly traded securities		11	
	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 Other assets. See Part IV, line 11	100,000.	15	100,000.
16 Total assets. Add lines 1 through 15 (must equal line 34)	4,737,985.	16	4,571,946.	
LIABILITIES	17 Accounts payable and accrued expenses	385,591.	17	707,481.
	18 Grants payable		18	
	19 Deferred revenue	278,216.	19	77,393.
	20 Tax-exempt bond liabilities		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 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	3,212,222.	24	3,212,222.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	3,876,029.	26	3,997,096.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29 and lines 33 and 34.			
	27 Unrestricted net assets	-68,848.	27	-41,153.
	28 Temporarily restricted net assets	930,804.	28	616,003.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		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	861,956.	33	574,850.
	34 Total liabilities and net assets/fund balances	4,737,985.	34	4,571,946.

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Form 990 (2011)

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,497,779.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,784,885.
3	Revenue less expenses Subtract line 2 from line 1	3	-287,106.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	861,956.
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	574,850.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

☐

- 1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- 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?
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 separate basis, consolidated basis, or both.
☒ 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?
- 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

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

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Form 990 (2011)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

POLISH COMMUNITY CENTER OF BUFFALO, INC.

Employer identification number

16-1067572

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a ☐ Type I
 - b ☐ Type II
 - c ☐ Type III — Functionally integrated
 - d ☐ Type III — Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**.
- f ☐ If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box.
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11 g (i)		
11 g (ii)		
11 g (iii)		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in column (i) listed in your governing document?		(v) Did you notify the organization in column (i) of your support?		(vi) Is the organization in column (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2011

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,786,137.	1,946,433.	2,742,756.	2,982,674.	3,146,988.	12,604,988.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	1,786,137.	1,946,433.	2,742,756.	2,982,674.	3,146,988.	12,604,988.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						12,604,988.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	1,786,137.	1,946,433.	2,742,756.	2,982,674.	3,146,988.	12,604,988.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	127,173.	124,410.	199,164.	313,696.	350,791.	1,115,234.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						13,720,222.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	91.87 %
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	92.51 %
16a 33-1/3% support test – 2011. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☒		
b 33-1/3% support test – 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐		
17a 10%-facts-and-circumstances test – 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ ☐		
b 10%-facts-and-circumstances test – 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐		

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Schedule A (Form 990 or 990-EZ) 2011

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include any 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	%
19a 33-1/3% support tests – 2011. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here . The organization qualifies as a publicly supported organization ▶ ☐		
b 33-1/3% support tests – 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here . The organization qualifies as a publicly supported organization ▶ ☐		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐		

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

[illegible]

**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

▶ Complete if the organization answered 'Yes' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545 0047

2011**Open to Public
Inspection**

Name of the organization

Employer identification number

POLISH COMMUNITY CENTER OF BUFFALO, INC.

16-1067572

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table:

	Amount
1c	
1d	
1e	
1f	

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b If 'Yes,' explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ _____ %

b Permanent endowment ▶ _____ %

c Temporarily restricted endowment ▶ _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		47,241.		47,241.
b Buildings		3,826,597.	1,245,429.	2,581,168.
c Leasehold improvements		466,398.		466,398.
d Equipment		605,777.		605,777.
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				3,700,584.

BAA

Schedule D (Form 990) 2011

Part VII Investments – Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
Total. (Column (b) must equal Form 990 Part X, column (B) line 12.)		

Part VIII Investments – Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, column (B), line 15.)	

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	

2 FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	3,497,779.
2	Total expenses (Form 990, Part IX, column (A), line 25)	3,784,885.
3	Excess or (deficit) for the year Subtract line 2 from line 1	-287,106.
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net) Add lines 4 through 8	
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	-287,106.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Part XIV Supplemental Information *(continued)*

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization

POLISH COMMUNITY CENTER OF BUFFALO, INC.

Employer identification number

16-1067572

Pt VI, Line 12c BOARD MEMEBERS & DEPT HEADS SIGN CONFLICT OF INTEREST STATEMENTS

Pt VI, Line 19 DOCUMENTS MADE AVAILABLE FOR PUBLIC INSPECTION AT 1081 BROADWAY, BUFFALO NY

Pt VI, Line 11a FORM 990 IS REVIEWED BY EXECUTIVE & BOARD MEMBERS PRIOR TO FILING

Pt XI PRIOR PERIOD ADJUSTMENTS

Schedule O (Form 990), Supplemental Information to Form 990

Form 990, Page 2, Part III, Line 4d (continued)

Describe the exempt purpose achievements for each of the organization's other program services. Section 501(c)(3) and (4) organizations and 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.

Code: _____ Description: THE ORGANIZATION ALSO PROVIDES PROPERTY MANAGEMENT SERVICES
 Expenses 2,067,818. FOR LOW INCOME APARTMENTS; CRIME VICTIMS ASSISTANCE;
 Grants Of 0. FOOD PANTRY DISTRIBUTION.
 Revenue 1,677,771.

DURING 2010 THE ORGANIZATION SERVED OVER 6,800 CLIENTS

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ

Form 990, Page 10, Line 24e All Other Expenses (continued)

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
REAL ESTATE TAXES	773.	662.	111.	0.
LICENSES & FEES	13,600.	10,577.	3,023.	0.
PROGRAM COSTS	739,706.	739,706.	0.	0.
MISCELLANEOUS	7,581.	2,602.	4,979.	0.
PROFESSIONAL FEES/CONTRACTS	18,550.	17,274.	1,276.	0.
FUNDRAISING	13,960.	0.	13,960.	0.
POSTAGE	8,625.	8,625.	0.	0.
PRINTING /PUBLICATIONS				

POLISH COMMUNITY CENTER OF BUFFALO, INC.

Notes to Financial Statements

December 31, 2011

1. BUSINESS OPERATION AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A. Operations

Polish Community Center of Buffalo, Inc. (PCCB), doing business as Lt. Col. Matt Urban Human Services Center of WNY, is a not-for-profit corporation organized for the purpose of providing housing and human services to the residents of the surrounding community.

B. Method of Accounting

The accompanying financial statements have been prepared on the accrual basis.

C. Property and Equipment

All property and equipment is carried at cost. Property and equipment costing more than \$500 acquired during the year has been capitalized and depreciated over their estimated useful lives using the straight-line method. Useful lives are as follows:

Buildings	30 to 40 Years
Improvements	20 Years
Equipment	5 to 7 Years

Depreciation expense for the years ended December 31, 2011 and 2010 was \$253,840 and \$165,690, respectively.

D. Inventory

The inventory, which is part of the weatherization program, is stated at cost, and consists of raw material and work-in-process.

E. Financial Statement Presentation

The organization has adopted Statement of Financial Accounting Standards (SFAS) No. 117, "Financial Statements of Not-for-Profit Organizations." Under SFAS No. 117, the Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets. In addition, the Organization is required to present a statement of cash flows. As permitted by the statement, the Organization has discontinued its use of fund accounting.

POLISH COMMUNITY CENTER OF BUFFALO, INC.

Notes to Financial Statements, Continued

December 31, 2011

F. Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles required management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

was donated to the project by the City of Buffalo.

3. INCOME TAXES

PCCB is exempt from Federal Income Taxes under Section 501 (c) (3) of the Internal Revenue Service Code and from New York State Corporation Franchise Tax. It has also been determined that the corporation is not a private foundation within the meaning of Section 509 (a) of the Internal Revenue Code.

The Organization does business only in New York State, and is in compliance with

POLISH COMMUNITY CENTER OF BUFFALO, INC.

Notes to Financial Statements, Continued

December 31, 2011

Federal and state regulations related to payroll, sales, use and withholding taxes. As of December 31, 2010, there were no outstanding inquiries from taxing authorities, and there are no liabilities for uncertainties related to taxes.

4. COMPARATIVE DATA

The financial information for 2010, presented for comparative purposes, is not intended to be a complete financial statement presentation in accordance with SFAS No. 117.

5. ONE-THIRD MATCHING AND IN-KIND CONTRIBUTIONS

The organization received sufficient funding from various sources to meet the rules for the New York State Housing and Community Renewal one-third matching requirement.

POLISH COMMUNITY CENTER OF BUFFALO, INC.

Notes to Financial Statements, Continued

December 31, 2011

9. CONCENTRATIONS

A significant portion of the Polish Community Center of Buffalo, Inc.'s revenue and support comes in the form of government grants. Accordingly, future funding is subject to continued appropriation by the various federal, state and local funding agencies. The terms and conditions of the grant and loan agreements subject the Polish Community Center of Buffalo, Inc. to various government rules and regulations. Future funding is dependent on the Polish Community Center of Buffalo, Inc.'s continued compliance with these rules and regulations.

10. LEASE COMMITMENT

The organization has refurbished the building at 1081 Broadway used for office space and other functions. The center is leased for 99 years beginning February 10, 1976 at the rate of \$1 per year. The organization pays all taxes and utilities which constitutes full rental payment of the premises. Effective May 2010, the building was transferred to the organization pursuant to the dissolution of the tax exempt organization that previously owned the property.

11. PRIOR PERIOD ADJUST

The Monroe Place apartments (Note 6) were constructed during 2009 and 2010. The organization received funding for the project during 2009, which was recorded as grant income. Pursuant to the final award agreement with HHAP, those funds are part of the mortgage note payable to HHAP. Accordingly, there is a prior period adjustment of \$159,014 as of December 31, 2010 to reflect this change.

12. SUBSEQUENT EVENTS

Management has evaluated events through June 26, 2012, and there are no material subsequent events that required to be disclosed in these financial statements.

FIXED ASSETS

Initials Date
Prepared By WJ 10/15/07
Approved By WJ 10/15/07

WILSON JONES 0711 GREEN 7113 BUFF

DATE	ASU	1	2	3	4	5	6	7	8
DATE	ASU	COST	RATE	METH.	ACG. DEPR.	2007	2008	2009	2010
					12-31-06				
LAND									
1985	SYCAMORE / ROTHER	2000000							
-	LOT 1097-1103 SYCAMORE	131534							
-	LOT KOSCIUSZKO ST.	1111000							
-	LOT 180 KOSCIUSZKO ST.	18050							
-	LOT 179 ROTHER & 1103 SYCAMORE	200000							
-	LOT 952 SYCAMORE	200000							
-	LOT 1073 BROADWAY	203650							
-		(2924054)							
1985	BUILDING - WALRNTY NOWICZ	72426866	40 YR / SL		38739259	1815659	1815659	1815659	1815659
94-99	IMPROVEMENTS	335550	40 YR / SL		335550				
2001	ROOF	137500	25 YR / SL		1187500	37500	37500	37500	37500
		(13899416)			(39243308)	(1853159)	(1853159)	(1853159)	(1853159)
1988	BUILDING - 385 PADEROWSKI	3491372	31 YR / SL		1950859	107427	107427	107427	107427
4-07	FENCE AND GATE	1473808	15 YR / SL			98254	98254	98254	98254
		(4963172)				(205721)	(205721)	(205721)	(205721)
2003	LEASEHOLD IMPROV. - 1081 BROADWAY								
2003	MASONRY RESTORATION, ROOF	23202576	30 YR / SL		2343300	740000	740000	740000	740000
1998	WINDOWS & PAINTING (SCH.)	3827930	31 YR / SL		1041029	122474	122474	122474	122474
	BOILER	(26006500)			(3394329)	(862174)			
8/2-08	CARPETING	1847879	7 YR / SL			(1/2) 151491	263983	263983	263983
5/2-08	WINDOWS	1540500	25 YR / SL			(1/2) 30800	61600	61600	61600
		(29418385)				(10252165)	(10252165)	(10252165)	(10252165)
VO	Vouched to Supporting INVOICE								

FIXED ASSETS

pg. 2

	Initials	Date
Prepared By		
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POLISH COMMUNITY CENTER

FIXED ASSETS

WILSON JONES 0711 GREEN 7213 BUFF

Prepared By: WJ Date: 3/28/09
 Initialed: WJ
 Approved By: WJ

DATE	ACQ	COST	RATE/METH.	ACQ. DEPR.	2007	2008	2009	2010	2011
1	2004	EQUIPMENT	13845606	15845606	168116				
2	2002	COMPUTERS AND RELATED EQUIPMENT, CCTV SYSTEM	1681151	1513035	168116				
3	2003	COMPUTERS	370700	254499	74153				
4	2004	COMPUTERS	225500	112750	45150				
5	2004	OFFICE FURNITURE	296742	74185	29674				
6	2005	COMPUTER	125800	51720	25860				
7	2006	COMPUTERS AND RELATED EQUIP.	513950	146075	146075				
8			(17043949)	(15706115)					
9	2007	NOVA COMPUTERS	285710	285710	285710				
10	4-21-07	THERMAL IMAGING CAMERA & ASSESS.	550700	65070	65070				
11	4-21-07	COMPUTER DESKS	1121720	6060	6060				
12	8-26-07	GYM EQUIPMENT	180705	180705	180705				
13	12-18-07	SECURITY CAMERA	299800	29980	29980				
14	8-26-07	TIME CLOCK	309150	30915	30915				
15			(18915124)	(1888133)					
16	4-21-08	COMPUTERS (S.N.A.P. LAB)	4841528	5141528	5141528				
17	4-21-08	FURNITURE (✓ V)	619789	1042152	1042152				
18	4-21-08	TIME CLOCK (F.N.A.L)	309150	309150	309150				
19	11-23-08	SECURITY SYSTEM - DULSKA	219800	219800	219800				
20	11-23-08	COPIER (WEATHERIZATION)	236600	236600	236600				
21	12-21-08	SECURITY CAMERAS (POLONIA)	149800	149800	149800				
22			(25291780)	(11482323)					
23	7-30-09	FORCE MACHINE	65800	65800	65800				
24	9-10-09	PORTABLE GENERATOR	287700	287700	287700				
25	12-8-09	NORTH STAR GENERATOR	237900	237900	237900				
26			(26422485)						
27	12-3-09	COMPUTERS FROM B.G.C.C. FUND	1890654	314285	314285				
28									
29	8-1-09	COMPUTERS (WEATH)	50800	50800	50800				
30	10-8-09	BLOWER FANS (WEATH)	310500	310500	310500				
31	4-7-09	COMPUTERS	304990	304990	304990				
32	6-15-09	TABLETS & BENCHES	522400	522400	522400				
33	9-24-09	TELEVISIONS	249475	249475	249475				
34	6-25-09	SECURITY SYSTEM (POLONIA BALL)	604800	604800	604800				
35			32399838						
36									
37									
38									
39									
40									

V0- VOUCHER TO SUPPORTING INVOICE

[illegible]

ASSETS

National Brand 45-613 45 317

PCCB
TRIAL BALANCE
12-31-11

		1		2		3	
				TRIAL BALANCE			
				12-31-10			
A/c				DR		CR	
1	2008	LAND		29240.54			
2							
3	2010	BUILDING-WALRNTYOWICZ		738994.16			
4	2015	ACC. DEPR. - ✓				466749.45	
5							
6	2020	BUILDING-383 PADEROWSKI		49651.72			
7	2023	ACC. DEPR. - ✓				27320.49	
8							
9	2100	EQUIPMENT		389340.68			
10	2125	ACC. DEPR. - EQUIP.				252093.02	
11							
12	2110	VEHICLES		176714.83			
13	2118	ACC. DEPR. - VEHICLES				105776.13	
14							
15	2044	LEASEHOLD IMPROVEMENTS		294483.85			
16	2045	AMORT. OF LEASE IMPROV.				76481.82	
17	-						
18							
19							
20	5000	FUND BALANCE				801743.07	
21							
22	-	TRANSFERS				509845.00	
23							
24							
25							
26				1678625.78	1781168.47		
27				102542.69			
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PCCB
HHAP
Monroe Place
Depreciation Schedule
12/31/10

Description	Years	Cost	Method
Land	n/a	18,000 00	N/A
Furniture	5 years	31,676 00	S/L
Building	40 years	3,114,477 00	S/L
		<u>3,164,153.00</u>	

Furniture

Building

Year	Expense	Accum Deprn
2010	4,751.40	4,751.40
2011	6,335.20	11,086.60
2012	6,335.20	17,421.80
2013	6,335.20	23,757 00
2014	6,335.20	30,092 20
2015	1,583 80	31,676 00

Year	Expense	Accum Deprn
2010	58,396.44	58,396.44
2011	77,861 93	136,258 37
2012	77,861 93	214,120 29
2013	77,861 93	291,982 22
2014	77,861 93	369,844.14
2015	77,861 93	447,706 07
2016	77,861 93	525,567 99
2017	77,861.93	603,429 92
2018	77,861 93	681,291 84
2019	77,861 93	759,153.77
2020	77,861.93	837,015.69
2021	77,861.93	914,877.62
2022	77,861.93	992,739 54
2023	77,861.93	1,070,601.47
2024	77,861 93	1,148,463.39
2025	77,861 93	1,226,325 32
2026	77,861 93	1,304,187 24
2027	77,861.93	1,382,049.17
2028	77,861.93	1,459,911.09
2029	77,861 93	1,537,773 02
2030	77,861.93	1,615,634 94
2031	77,861.93	1,693,496 87
2032	77,861 93	1,771,358.79
2033	77,861.93	1,849,220 72
2034	77,861.93	1,927,082 64
2035	77,861 93	2,004,944.57
2036	77,861 93	2,082,806 49
2037	77,861 93	2,160,668 42
2038	77,861 93	2,238,530 34
2039	77,861 93	2,316,392 27
2040	77,861 93	2,394,254 19
2041	77,861.93	2,472,116.12
2042	77,861.93	2,549,978 04
2043	77,861.93	2,627,839.97
2044	77,861.93	2,705,701.89
2045	77,861 93	2,783,563.82
2046	77,861 93	2,861,425 74
2047	77,861.93	2,939,287 67
2048	77,861 93	3,017,149 59
2049	77,861.93	3,095,011 52
2050	19,465 48	3,114,477 00

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