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Form 990

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2011

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

<u> </u>	For the 20	011 calend	lar year, or tax yea	r beginni	ng		, 2	<u>2011, a</u>	and endin	g			,		
В	Check if app	licable	C Name of organization	n GREE	K AME	RICAN R	ESTAURA	TNA	ASSOCI	ATION			fication Nur	nber	
	Address	s change	Doing Business As			. ===						<u> 3693</u>			
	Name c	hange	Number and street	(or P O box	if mail is not	delivered to s	treet addr)		Room/s	suite	E Telepho	one numb	per		
	Initial re	eturn	733 LEE ST						200		(84)	7) 6:	<u>35-150</u>	10	
	Termina	ated	City, town or countr	у	-		•	State	ZIP code + 4						-
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	Applica	tion pending	F Name and address	of principal of	officer					H(a) Is this	a group retur			Yes	X No
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ī	Tax-exem	ot status		01(c) (6		(insert no)	4947(a)(527	IT NO,	attach a list	(see ins	tructions)		_
j		e: ► N/		***\ <u>**</u> Z\		<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			H(c) Group	exemption no	ımber ▶			
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Activities & Governance															
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ove.	2 Che	ck this bo	x ► If the org	anızatıon	dıscontını	ued its oper	ations or d	– – Ispos	ed of mor	e than 25°	% of its ne	et asse	 ts.		
Ğ			ting members of th					•				_ 3			0
9	4 Nur	nber of inc	dependent voting m	nembers o	of the gove	erning body	(Part VI, I	ıne 1t	o)			4			0
/itie			of individuals emp	-	-	ear 2011 (F	Part V, line	2a)			•	5			
ਰੁੱ	t .		of volunteers (esti						• •			6			15
⋖	1		d business revenu					•		• • • •		7a			0.
	b Net	unrelated	business taxable i	ncome fro	m Form S	90-1, line	<u> 34</u>			т		7 b			342.
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6			and grants (Part V			• •		•	• • •	`	535,3 20,1			289,	
E , (ice revenue (Part \			۰۰۰ است.	•		••	-	109,9			-22	<u>0.</u> 088.
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S. Revenue	1		e (Fart VIII, colum e – add lines 8 thro					line			663,2				629.
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M. Expenses M.	14 Benefits paid to or for members (Part IX, column (A), line 15 Salaries, other compensation, employee benefits (Part IX, column A), line 15 Salaries, other compensation, employee benefits (Part IX, column A), line 15 Salaries, other compensation, employee benefits (Part IX, column A), line 15 Salaries, other compensation, employee benefits (Part IX, column A), line 15 Salaries, other compensation, employee benefits (Part IX, column A), line 15 Salaries, other compensation, employee benefits (Part IX, column A), line 15 Salaries, other compensation, employee benefits (Part IX, column A), line 15 Salaries, other compensation, employee benefits (Part IX, column A), line 15 Salaries, other compensation, employee benefits (Part IX, column A), line 15 Salaries, other compensation, employee benefits (Part IX, column A), line 15 Salaries, other compensation, employee benefits (Part IX, column A), line 15 Salaries, other compensation, employee benefits (Part IX, column A), line 15 Salaries, other compensation, employee benefits (Part IX, column A), line 15 Salaries, other column A), line 15														
وَمُ	13 3al	15 Salaries, other compensation, employee benefits (Part IX, column (A), line 11eSCHILLER PARK, IL 60176 b Total fundraising expenses (Part IX, column (D), line 25)													
,€ \$ ≥	Iba Pro	tessional i	rundraising tees (P	art IX, coi	umn (A),	iine i ie ja t	HILLER	PAF	RK. IL	1178					
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	17 Oth	er expens	es (Part IX, columi	ո (A), line	s 1 ia-11c	l, 11f-24e)	!! !!	. ^	3 3.423		60,2				333.
	18 Tota	al expense	es. Add lines 13-17	(must eq	ual Part I	X, column (78 , 0				933.
		enue less	expenses. Subtrac	ct line 18	from line	12 .	REC		VED	<u> </u>	585 , 1	.59.		<u>-19,</u>	304.
8								- A	ميساند کند ک		ng of Curren	$\overline{}$		of Yea	
Not Assets Fund Balanc	20 Tot	al assets ((Part X, line 16)		•		. 450	13	12	2	712,9		2,	<u>650,</u>	703.
\$ P	21 Tota	al liabilitie	s (Part X, line 26)	•					•	ļ	30,2	210.			<u> </u>
ş	22 Net	assets or	fund balances Su	btract line	21 from	line 20				2	,682,7	769.	2,	650,	703.
Pa	art II	Signatur	e Bløck /												
		of perjury, I de	clare that I have examinate (giher than office) is	ed this return	n, inc j ûding a	cçompanying	schedules and	statem	ents, and to	the best of m	y knowledge	and beli	ef, it is true,	correct,	and
com	piete Declara	ation of propa	orer (other than officer) is	based on al	Intermation	of which prepa	arer nas any k	nowledi	ge 						
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Sig	gn '	Signatu	re of officer		<u>l</u> -			- ^		Da	ite	/	/20	/,,	
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		Type or	print name and title									- '			
		Print/Type p	oreparer's name	ł	Preparer's s	gnature			Date		Check	J"	PTIN		
Pa	id	JIMMY	BOROVILOS		JIMMY	BOROVII	LOS		06/27/	12	self-employ	ed .	P01563	866	
Pr	eparer	Firm's name	BAHRAMI:	S & BO	ROVILO	S LTD				_					
Us	e Only	Firm's addr	ess ► <u>1645 S.</u>	RIVER	RD. S	UITE 1	7				Fırm's EIN	► 45-	-25217	70	
			DES PLA	INES			IL 6	0018	3-4111		Phone no				
Ma	y the IRS	discuss th	is return with the p	reparer st	nown abov	/e? (see ins	structions)						X Yes	ŝ	No
_															

	990 (2011) GREEK AMERICAN RESTAURANT ASSOCIATION	36-3	693719		Page 2
Par					
	Check if Schedule O contains a response to any question in this Part III	<u> </u>			$\perp \square$
1	Briefly describe the organization's mission:				
	SEE PART III (a) BELOW				
					- -
					
2	Did the organization undertake any significant program services during the year which were not listed of		П у.		
	Form 990 or 990-EZ?	• • • •	. Yes	X	No
2	If 'Yes,' describe these new services on Schedule O.		□ v _a	. Fol	NI.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program s	ervices	∐ Yes	X	No
4	If 'Yes,' describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program service.	7/1005 35 m 0	acured by a	vnonco	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the others, the total expenses, and revenue, if any, for each program service reported.	amount of gra	ants and allo	cations	s to
4a	(Code:) (Expenses \$ including grants of \$)	(Revenue	\$)
	ASSISTS ACTIVE GREEK AMERICAN RESTAURNAT OWNERS PURCHASE				
	ITEMS FOR THE OPERATION OF THEIR ESTABLISHMENTS				
					
4 b	(Code:) (Expenses \$ including grants of \$)		\$)
	CONTRIBUTIONS TO VARIOUS INSTITUTIONS				
	: (Code:) (Expenses \$ including grants of \$)	/Pavenus	<u> </u>	·	
40	(Code:) (Expenses 5 including grants of 5	(Nevenue	٠		—- [']
					- - -
		-			
40	Other program services. (Describe in Schedule O.)				
-70	(Expenses \$ including grants of \$) (Revenue	\$)	
40	Total program service expenses ▶	·			

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		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 'Yes,' complete Schedule C, Part I	3		х
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	4		
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	5_		х
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	6_		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8_		х
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? <i>If 'Yes,' complete Schedule D, Part IV</i>	9_		х
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	10		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, 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	11 a	х	
	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	11 b		х
	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	11 c		х
	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	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		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	11 f		Х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		<u>x</u>
	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	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		<u> </u>
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> X</u>
	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	14b		<u>x</u>
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	15		х
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_		х
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)	17		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	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		<u>x</u>
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		<u>x</u>
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

		,	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	х_	
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		х
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>	23		x
24	a 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? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		_
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a 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		<u></u>
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		<u>x</u> _
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? If 'Yes,' complete Schedule L, Part III	27		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):		# L	* 1
;	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		<u> </u>
١	b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		х
•	c 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		<u>x</u> _
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		<u>X</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
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		<u>x</u>
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		<u>x</u> _
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	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
-	b 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	35b		<u>x</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		_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	38		<u> x</u>
3A.		Form	990 (2011)

TEEA0104 01/23/12

Form 990 (2011) GREEK AMERICAN RESTAURANT ASSOCIATION 36-3693719 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 b **b** Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X 2a 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 . . . 2b 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) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?. 3a Х b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O... 3ь Х 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)? **4**a **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 Х 5b Х b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If 'Yes.' to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Х 6a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were 64 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? 7 a Х 7b **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? d If 'Yes,' indicate the number of Forms 8282 filed during the year Х e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e **7**f X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 70 as required? . h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7h Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. 9a a Did the organization make any taxable distributions under section 4966? . . 9b b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: 10a a Initiation fees and capital contributions included on Part VIII, line 12 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities ... 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11 a b Gross income from other sources (Do not net amounts due or paid to other sources 11 b against amounts due or received from them.) 12a 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 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a

13b

13c

a is the organization licensed to issue qualified health plans in more than one state?

b Enter the amount of reserves the organization is required to maintain by the states in

14a Did the organization receive any payments for indoor tanning services during the tax year?

which the organization is licensed to issue qualified health plans . .

c Enter the amount of reserves on hand

Note. See the instructions for additional information the organization must report on Schedule O.

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

14b

Form 990 (2011)

	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or char	ges i	n	
	Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI			x
Sec	ction A. Governing Body and Management			
			Yes	No
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			
	b Enter the number of voting members included in line 1a, above, who are independent 1b			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		Х
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		x
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6		6		Х
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?	7a		х
	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?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
	a The governing body?	8a 8b	X	
	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	9		x
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
	a Did the organization have local chapters, branches, or affiliates?	10a		X
	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?	10Ь		
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.	10		7,
	2a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a		X
	b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12c		
			ļ	7
13	· · · · · · · · · · · · · · · · · · ·	13		X
13 14 15	Did the organization have a written document retention and destruction policy?			X
14 15	Did the organization have a written document retention and destruction policy? 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?	13 14		Х
14 15	Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	13 14 15a		X
14 15	Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	13 14		Х
14 15	Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	13 14 15a 15b		X X X
14 15	Did the organization have a written document retention and destruction policy? 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	13 14 15a		X
14 15	Did the organization have a written document retention and destruction policy? 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	13 14 15a 15b		X X X
14 15 16	Did the organization have a written document retention and destruction policy? 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.) 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?	13 14 15a 15b		X X X
14 15 16	Did the organization have a written document retention and destruction policy? 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.) 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? Cotion C. Disclosure List the states with which a copy of this Form 990 is required to be filed Illinois	13 14 15a 15b 16a		X X X
14 15 16	Did the organization have a written document retention and destruction policy? 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? 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.) 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? Cection C. Disclosure List the states with which a copy of this Form 990 is required to be filed Illinois Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) avainspection. Indicate how you make these available. Check all that apply.	13 14 15a 15b 16a		X X X
14 15 16 Se 17	Did the organization have a written document retention and destruction policy? 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	13 14 15a 15b 16a		X X X
14 15 16 <u>Se</u> 17 18	Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Dother officers of key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Dif '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? Cetion C. Disclosure List the states with which a copy of this Form 990 is required to be filed Lillinois Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) avainspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization to make its power or the person who possesses the books and records of the organization or the person who possesses the books and records of the organization to make its power or the person who possesses the books and records of the organization to the person who possesses the books and records of the organization to the person who possesses the books and records of the organization to the person who possesses the books and records of the	13 14 15a 15b 16a 16b allable	for pu	X X X

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

Check 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 r	elated	org	anız	atio	n com	pen	sated any current office	cer, director, or truster	e
					2)					-
(A) Name and tille	(B) Average hours per week		and a	direc	tor/t	nan one h an offi rustee)	box, cer	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	(describe hours for related organiza- tions in Schedule O)	adividual france or director	institutional frustee	Officer	Key employee	Hig) est compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) JAMES P. VERROS DIRECTOR	1.00	Х						0.	0.	0.
(2) CHRIS DEMOS										
TREASURER	1.00	х						0.	0.	0.
(3) PETER ARCHOS ASST. TREASURER	1.00	х						0.	0.	0.
(4) SAM MARKOS	2.00							· · · · · · · · · · · · · · · · · · ·		
DIRECTOR	1.00	х						0.	0.	0.
(5) THOMAS C. DIAMOND				х				0.	0.	
PRESIDENT	1.00	Λ.	\vdash	Α.	<u> </u>	_		<u> </u>	· · · · · · · · · · · · · · · · · · ·	0.
(6) MATT_MANAVES CHAIRMAN OF THE BOARD	1.00	Х		_				0.	0.	0.
	1.00	х						0.	0.	0.
(8) GEORGE RADAIOS DIRECTOR	1.00							0.	0.	0.
(9) PETER SARANTOPOULOS								0.	0.	0.
DIRECTOR (10) NICK KATSIS	1.00		-		H	-	<u> </u>		0.	<u> </u>
VICE PRESIDENT	1.00	х						0.	0.	0.
(1) STEVE THEOFANOUS DIRECTOR	1.00	х						0.	0.	0.
(12) GEORGE VLAHAKIS DIRECTOR	1.00							0.	0.	0.
(13) ANGELO SELLIS DIRECTOR	1.00							0.	0.	0.
(14) TED ARVANITIS DIRECTOR	1.00							0.	0.	0.

Part VII Section A. Officers, Directors, Trust	ees, l	∢еу	Em	plo	ye	es,	and	d Highest Com	pensated Emp	loyees (cont)
				•	C)					
(A) Name and title	(B) Average hours	box	not c , unle	ss pe	rson	ıs bot	h an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	per week (describ	or di	Inst	Officer	Χey	emp emp	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization
	week (describ e hours for related organi- zations	rector	กรชชชชงกลไ	ĕ	Key employee	Highest compensated employee	ner			and related organizations
	related organi-	truste	al trustee		yee	mper				
	Sch O)		tee			sated				
(15) GEORGE FOUNTALAS DIRECTOR	1.00	x						0.	0.	0.
(16) CHRIS GEORGES DIRECTOR	1.00							0.	0.	
(17) GEORGE KARAS							_	0.	0.	
DIRECTOR (18)	1.00								0.	0.
(19)	ļ					_	_		·	
(20)	}					_	_			
	<u> </u>			_						
(21)									<u></u> .	
(22)										
(23)										
(24)										
(25)										
1 b Sub-total			•				>	0.	0.	0.
c Total from continuation sheets to Part VII, Section A			• •		•	٠	>			
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited			ted	abov	ve) v	who	rece	0.	0.000 of reportab	le compensation
from the organization		,								
3 Did the organization list any former officer, director of	or trusti	ee k	ev e	mnl	ove	e or	hiai	hest compensated	emnlovee	Yes No
on line 1a? If 'Yes,' complete Schedule J for such inc	dıvıdua		• •	•	• •	•		• • • • • • • • • • • • • • • • • • • •		3 X
4 For any individual listed on line 1a, is the sum of rep the organization and related organizations greater th such individual	an \$15	0,00	0? //	t 'Ye	s'c	ind o	iete	r compensation fro Schedule J for	m	4 X
5 Did any person listed on line 1a receive or accrue co for services rendered to the organization? If 'Yes,' co	mpens	atıcı	n froi	m aı	ny u	nrela	ated	organization or in	dıvıduat	5 X
Section B. Independent Contractors	nipiete	: <u>JC</u> 1	ieuu	<i>ic 3</i>	101	Sucri	per	3011	· · · · ·	<u> </u>
Complete this table for your five highest compensate compensation from the organization. Report compensation.	d indep	end for t	ent d	cont	racti dar	ors t vear	hat end	received more that	n \$100,000 of the organization's	ax vear.
(A) Name and business address			•	,.				(B)		(C) Compensation
						_				
2 Total number of independent contractors (including b		lum-A	od 4-	, the	\CC	ıcta	1 0 5	(ve) who soccited	more then	
\$100,000 in compensation from the organization	out HOT		eu (C	uic	,3E 1	151E(a a D		more than	

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rai	t viii Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	t All other contributions, gifts, grants, and similar amounts not included above 1a b Membership dues 1b c Fundraising events . 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 289, 616.				
AND	g Noncash contributions included in lns 1a-1f: \$	200 616			
<u>ا</u>	h Total. Add lines 1a-1f	289,616.			
RVICE REVENU	2a GOLF OUTING 15	0.	0.	0.	0.
₹ SE	d			···	
GRA	f All other program service revenue				
PRO	g Total. Add lines 2a-2f	0.			
	 Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds 	23,088.	23,088.	0,	0.
	5 Royalties				
i !	(i) Real (ii) Personal 6a Gross rents 67, 200. b Less: rental expenses 88, 542. c Rental income or (loss)21, 342.				
	d Net rental income or (loss)	-21,342.	-21,342.	0.	0.
	7 a Gross amount from sales of assets other than inventory . b Less: cost or other basis				
	and sales expenses . c Gain or (loss)				
	d Net gain or (loss)				·
NUE	8a Gross income from fundraising events (not including \$				
OTHER REVEN	of contributions reported on line 1c). See Part IV, line 18				
Ę	b Less: direct expenses b c Net income or (loss) from fundraising events			· · · · · · · · · · · · · · · · · · ·	
	9a Gross income from gaming activities. See Part IV, line 19				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities				
	10 a 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 OTHER INCOME 14	2,267.	2,267.	0.	0.
	c				
	d All other revenue				
	e Total. Add lines 11a-11d	2,267.			
	12 Total revenue. See instructions	293,629.	4,013.	0.	0.

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Part X 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 re-	sponse to any question i	n this Part IX	····	
	not include amounts reported on lines 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	224,600.			-
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.				
	Benefits paid to or for members				
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			<u> </u>	
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
	Fees for services (non-employees):		 		· · · · · · · · · · · · · · · · · · ·
	Management				
		16,901.		16,901.	
	Legal	10, 301.		10,301.	
	Accounting				
	Lobbying		·		
	Professional fundraising services. See Part IV, line 17			5 8 8 5	
	Investment management fees	5,535.		5,535.	
ç	Other				
12	Advertising and promotion	2,870.		2,870.	
13	Office expenses	4,020.		4,020.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				<u> </u>
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings .	2,616.		2,616.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	47,695.			
23	Insurance	622.		622.	
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	UTILITIES	4,119.		4,119.	
	TELEPHONE	0.		0.	·
	MISCELLANEOUS	2,190.		2,190.	
	DUES AND SUBSCRIPTIONS	1,765.		1,765.	
	All other expenses				
	Total functional expenses. Add lines 1 through 24e	312,933.		40,638.	
	Joint costs. Complete this line only if			10,030.	
20	the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
	SOP 98-2 (ASC 958-720)				
	30F 30-2 (A3C 300-720)]				

		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	23,716.	1	45,688
2	Savings and temporary cash investments	. 1,414,705.	2	629,866
3	Pledges and grants receivable, net	278,916.	3	189,618
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key employer and highest compensated employees. Complete Part II of Schedule L	ees,	5	
6	Receivables from other disqualified persons (as defined under section 4958(f) persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiar organizations (see instructions)	у	6	
7	Notes and loans receivable, net		7	
7 8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	2,500.	9	2,500
10:	a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b Less: accumulated depreciation		10 c	1,783,031
111	Investments — publicly traded securities		11	1,700,001
12	Investments – other securities. See Part IV, line 11	· · ·	12	
13	Investments – program-related. See Part IV, line 11	·	13	
14	, -		14	
15	Intangible assets	` 	15	
1	Total assets. Add lines 1 through 15 (must equal line 34)		16	2,650,703
16 17	Accounts payable and accrued expenses	30,210.	17	2,630,703
18	Grants payable	30,210.	18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	<u> </u>
0.0	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
21	·		22	
23			23	
24			24	
25			25	
26		30,210.	26	(
+	Organizations that follow SFAS 117, check here ► and complete lines			
:	27 through 29 and lines 33 and 34.			
27	Unrestricted net assets		27	
27 28 29	Temporarily restricted net assets		28	
29	•		29	
:	Organizations that do not follow SFAS 117, check here > X and complete	e	[]	· · ··
	lines 30 through 34.			
30		1,000.	30	1,000
	Paid-in or capital surplus, or land, building, or equipment fund	. 64,382.	31	64,382
1 22	Retained earnings, endowment, accumulated income, or other funds			2,585,321
33	-	2,682,769.		2,650,703
34				2,650,703
AA	Total napintos and not association buildiness	<u></u>	<u> </u>	Form 990 (20

Form 990 (2011) GREEK AMERICAN RESTAURANT ASSOCIATION	36-3693719	Page 12
Part প্রা Reconciliation of Net Assets		
Check if Schedule O contains a response to any question in this Part XI	<u></u>	xJ
	1 - 1	
1 Total revenue (must equal Part VIII, column (A), line 12)		293,629.
2 Total expenses (must equal Part IX, column (A), line 25)	2	312,933.
3 Revenue less expenses. Subtract line 2 from line 1	3	-19,304.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		2,682,769.
5 Other changes in net assets or fund balances (explain in Schedule O)	5	-12,762.
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	2,650,703.
Part XIII 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: Cash X 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?		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 oversign review, or compilation of its financial statements and selection of an independent accountant?	nt of the audit,	2c X
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 separate basis, consolidated basis, or both:	s issued on a	
Separate basis X 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 Audit Act and OMB Circular A-133?	n the Single	3a X
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	e required audit	3b
BAA		Form 990 (2011)

SCHEDULE D (Form 990)

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

Employer identification number

Department of the Treasury Internal Revenue Service

36-3693719 GREEK AMERICAN RESTAURANT ASSOCIATION 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 Aggregate contributions to (during year) ... Aggregate grants from (during year) ... Aggregate value at end of year. 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? 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? ... Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. 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 Preservation of a certified historic structure Protection of natural habitat Preservation of open space 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 2a a Total number of conservation easements **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 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a 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 . ▶\$ 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)	Schedule D (Form 990) 2011 GREE	K AMERICA	N RESTAURANT A	ASSOCIATION	<u>36-369</u>	3719	Page 2
terms (check all that apply): a Public exhibition d Loan or exchange programs b Scholarly research c 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 solucit or receive donations of an instancial treasures, or other similar assets to be solid to rase further starter than to be maintained as part of 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, tristee, outledian, or other intermediany for contributions or other assets not included on Form 990, Part XIV bit "Yes," explain the arrangement in Part XIV and complete the following table: c Beginning balance Additions during the year 1d - Destributions complete the following table: a Beginning of year balance (a) Other types No bit "Yes," explain the arrangement in Part XIV - Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Other types (b) Prior year (c) Two years back (d) Three years back (d) Four years back - Destributions (a) Other types (b) Prior year (d) Two years back (d) Three years back (d) Four years back (d) Two years bac	Part III Organizations Mainta	ining Collec	ctions of Art, Hist	orical Treasures, o	or Other Similar Ass	ets (contir	nued)
b Scholarly research e Other Preservation for future generations 4 Provides a description of the organization's collections and explain how they further the organization's exempt purpose in Provides a description of the organization's collections and explain how they further the organization's exempt purpose in sassets to be sold to raise funds rather than to be maintained as part of the organization collection? Yes No Part IV/I 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? In a set of the organization answered Yes' to Form 990, Part X, line 21. 1b If Yes, explain the arrangement in Part XIV and complete the following table: 1c d Additions during the year. 1 d	3 Using the organization's acquisiti items (check all that apply):	on, accession,	and other records, che	eck any of the following	that are a significant use	e of its collect	ion
c Preservation for future generations A 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 answered "Yes" to Form 990, Part IV. Inic 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an aspert, furtice, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1a is the organization and the arrangement in Part XIV and complete the following table: Beginning balance 1c	a Public exhibition		d Loan				
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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 organizations collection? [Part IVA] Excrow 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? b if 'Yes,' explain the arrangement in Part XIV and complete the following table: Amount c Beginning balance. d Additions during the year. e Distributions during the year. 1 te d definition of the organization include an amount on Form 990, Part X, line 21? It is also the organization include an amount on Form 990, Part X, line 21? Yes No bif 'Yes,' explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. 1a Beginning of year balance. b Contributions c Net investment earnings, gains, and losses of the organization answered 'Yes' to Form 990, Part IV, line 10. 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 \$ c Temporarily restricted endowment \$ c Temporarily restricted endowment \$ d Addition or facilities and programs 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 (iii) related organizations iii) (ivestiment) a Color or other basis (other) a Described in Part XIV the intended uses of the organizations endowment funds. Part XIII Land, Buildings, and Equipment. See Form 990, Part X, line 10(c).) 1, 834, 349. c Leasehold improvement	c Preservation for future gener	ations					
Part IV Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 91, 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? No bit 'Yes, explain the arrangement in Part XIV and complete the following table:	Part XIV.		·	•		in	
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b If Yes,' explain the arrangement in Part XIV and complete the following table: c Beginning balance	Part IV集 Escrow and Custodia	I Arrangem	ents. Complete if	the organization a		rm 990, Pa	
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c Beginning balance d Additions during the year 1e Distributions 1ft (b) Prior year 1e Distributions 1e Distribution	b If 'Yes,' explain the arrangement	ın Part XIV an	d complete the following	ng table:	<u> </u>		
d Additions during the year						Amount	
e Distributions during the year		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •			-	
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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. 1 a Beginning of year balance	=				· [T Yes	ΠNο
Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. A Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e)	_		1 330, 1 att A, iiiic 21:			es	
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years years (e) Four year			ne organization an	swered 'Yes' to Fo	rm 990, Part IV, line	2 10.	
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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 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 depreciation (a) Equipment b Buildings	2 Provide the estimated percentage	e of the current	year end balance (line	e 1g, column (a)) held a	as:		
c Temporarily restricted endowment ►	a Board designated or quasi-endow	vment 🕨	<u> </u>				
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 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 Buildings c Leasehold improvements d Equipment e Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 1 a Land 1 4 1, 216.	b Permanent endowment ▶	· · · · · · · · · · · · · · · · · · ·					
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(ii) related organizations 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 (b) Cost or other basis (other) 1a Land b Buildings 1,834,349. c Leasehold improvements d Equipment 20 Description of property 141,216. e Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 3a(ii) 3b 3b 4 Description of property (c) Accumulated depreciation (d) Book value 1,834,349. 1,834,349.		n the possession	on of the organization t	hat are held and admin	nistered for the	Yes	No
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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 (b) Cost or other depreciation 1a Land b Buildings 1,834,349. c Leasehold improvements d Equipment Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) (c) Accumulated depreciation (d) Book value 1,834,349. 1,834,349. 1,834,349.	(ii) related organizations					. 3a(ii)	
Part VI: Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) 1 a Land b Buildings c Leasehold improvements d Equipment e Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) (c) Accumulated depreciation (d) Book value 1,834,349. 1,834,349. 1,834,349. 1,834,349.	b If 'Yes' to 3a(II), are the related o	organizations lis	sted as required on Sci	hedule R?		3b	
Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation 1 a Land b Buildings							
I a Land (investment) basis (other) depreciation b Buildings 1,834,349. 1,834,349. c Leasehold improvements 141,216. 141,216. d Equipment 141,216. 141,216. e Other 1,975,565.							
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c Leasehold improvements <t< td=""><td></td><td>· ···<u>·</u></td><td></td><td></td><td>The state of the s</td><td></td><td></td></t<>		· ··· <u>·</u>			The state of the s		
d Equipment		· · · · · · ·	1,834,349.	<u> </u>		1,834	1,349.
e Other	·						
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)	• •		141,216.			141	.,216.
		on (d) marint a	of Form 000 Bod V	olumn (P) line 10(e)		1 075	F. F. F. F.
		ııı (a) must equ	iai roitii 990, Part X, C	<u> </u>	Schor		

Schedule **D** (Form 990) 2011

	D (Form 990) 2011 GREEK AMERICAN E			36-3693	719 Page 3
Part VII	Investments - Other Securities. Se		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	n: value
	cial derivatives		<u> </u>		
	y-held equity interests		ļ		
(3) Other				· · · · · · · · · · · · · · · · · · ·	
<u>(A)</u>			<u> </u>	<u> </u>	
<u>(B)</u>			<u> </u>		
(C)			<u> </u>		
<u>(P)</u>					
<u>(E)</u> .					
JF)					
<u>(G)</u> .		_		······································	
(H)				···	
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	mn (b) must equal Form 990 Part X, column (B) line 12.)	<u> </u>	<u>L</u>		
Part VIII	Investments - Program Related. Se		<u>, line 13.</u>		
·	(a) Description of investment type	(b) Book value		(c) Method of valuation Cost or end-of-year market	i: value
(1)			<u> </u>		
(2)					
(3)					
(4)			<u> </u>		
(5)					
(6)			ļ		
(7)					
(8)			<u> </u>	<u> </u>	
(9)	<u> </u>		<u> </u>		· -
(10)					
	mn (b) must equal Form 990, Part X, column (B) line 13)	<u> </u>	<u> </u>	 	
Part IX	Other Assets. See Form 990, Part >	Description			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
	olumn (b) must equal Form 990, Part X, column	(B), line 15.)		. <u>.</u> ,	
Part X	Other Liabilities. See Form 990, Pa	rt X, line 25.			
	(a) Description of liability	(b) Book value	<u> </u>		
(1) Fede	eral income taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					Í
(8)					
(9)					
(10)					
(11)					
	mn (b) must equal Form 990, Part X, column (B) line 25.)	▶]		
2 FIN 48 (/ organizatio	ASC 740) Footnote. In Part XIV, provide the tex on's liability for uncertain tax positions under Fil	t of the footnote to the org N 48 (ASC 740).	ganization's f	inancial statements that reports	s the

Sche	edule D (Form 990) 2011 GREEK AMERICAN RESTAURANT ASSOCIATION	36-3693719	Page 4
Par	t 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)		
2	Total expenses (Form 990, Part IX, column (A), line 25)		
3	Excess or (deficit) for the year. Subtract line 2 from line 1		
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
5	Investment expenses		
7	Prior period adjustments	· · · .	
,	Other (Describe in Part XIV.)	· · · · · · · · · · · · · · · · · · ·	
٥	Total adjustments (net). Add lines 4 through 8		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		
	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	
	Total revenue, gains, and other support per audited financial statements		
1		 	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	a Net unrealized gains on investments 2a		
	Donated services and use of facilities	 	
	Recoveries of prior year grants		
	d Other (Describe in Part XIV.)		
•	e Add lines 2a through 2d		
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	'	
	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
ı	b Other (Describe in Part XIV.)		
	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	
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses p	oer 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:	10 5	
	a Donated services and use of facilities		
ı	b Prior year adjustments		
	c Other losses		
(d Other (Describe in Part XIV.)		
	e Add lines 2a through 2d	2 e	
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	15	
	c Add lines 4a and 4b	4c	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
	rt XIV Supplemental Information		
Part	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comple additional information.	/, lines 1b and 2b; te this part to provide	

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Schedule **D** (Form 990) 2011

Schedule D (Form 990) 2011 GREEK AMERICAN RESTAURANT ASSOCIATION	36-3693719	Page 5
Schedule D (Form 990) 2011 GREEK AMERICAN RESTAURANT ASSOCIATION Part XIV Supplemental Information (continued)		
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SCHEDULE I (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

GREEK AMERICAN RESTAURANT ASSOCIATION

[Park] General Information on Grants and Assistance

(b) EIN

1 (a) Name and address of organization or government

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Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

2011

OMB No 1545-0047

Open to Public Inspection

Employer identification number

36-3693719

Schedule I (Form 990) (2011) **ջ** □ (h) Purpose of grant or assistance Form 990, Part IV, line 21 for any reciplent that received more than \$5,000. Check this box if no one reciplent received more than \$5,000. . X Rantin Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to (g) Description of non-cash assistance : 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance : : Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Part II can be duplicated if additional space is needed 3 Enter total number of other organizations listed in the line 1 table

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Page 2 Schedule I (Form 990) (2011) GREEK AMERICAN RESTAURANT ASSOCIATION

| Partill | Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

| Part III can be duplicated if additional space is needed.

מוניון כמון זה מתלווסמוסמו המתנווס וויים ו					
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Supplemental Information. Complete this part to provide the information required in Part I,	ete this part to pi	rovide the informat	ion required in Par	line 2,	and any other additional information.
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Schedule I (Form 990) (2011)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

गीटीएनी का सहत्त्व सर्वोज्ञहरूसती

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization 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.

GREEK AMERICAN RE	STAURANT ASSOCIATION	36-3693719
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