Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

	nal Revenu	e Service	► Go to www.irs.	gov/Form990 for i	nstructions and th	ne latest in	formation.		Inspection
A	For the	2018 cale	ndar year, or tax year beginning	9	, 2018, a	nd ending			, 20
 В	Check if a		C Name of organization 548		INC				er identification number
	Address c		Doing business as	_				54-	0788156
$\bar{\exists}$	Name cha	-	Number and street (or P O box if n	nail is not delivered to	street address)	Room/suite	•	E Telephon	ne number
5	Initial retu	-	100 Colun	757	-930-0491				
=		/terminated	City or town, state or province, cou	intry, and ZIP or forei	gn postal code	·			
5	Amended		Newport Ne	ניט s, VA	2360	C		G Gross re	ceipts \$ 313,026
$\bar{\exists}$		n pending	F Name and address of principal office	er		$\overline{\Delta}$	H(a) is this a o	=	subordinates? Yes No
_		,	John Edwards,1	00 Co (u, b	us WAY, MAN	34A	1	•	s included? Yes No
	Tax-exem	pt status	501(c)(3) X 501(c)	(d→) ◀ (insert ne	on 4947(a)(1) or	527 V	_ · ·		list (see instructions)
]	Website:		7-7	<u> </u>	1 10.1.00,17.5		H(c) Group	exemption	number >
_			Corporation Trust Associ	ation ☐ Other ▶	LYea	r of formation	n 1970		of legal domicile
_	art I	Summ			1		. , , , ,		
			escribe the organization's mis-	sion or most sign	nificant activities	We	Are	1 hal	dise candal
ë		For	Knights of C	01 - n-D	S Can N	0:1 4	470	Ne	ncoulde
Governance	-	F 12	cilities for	the		A A C	itu c	FNew	2 200 / 10125
ern	2 (Check th	is box ▶ ☐ if the organization	discontinued its	operations or di	sposed of	more than	25% of	its net assets
Š	I .		of voting members of the government		•			3	13
			of independent voting member		· · · · · · · · · · · · · · · · · · ·	line 1h)		4	13
Activities &	ı		nber of individuals employed	_	• • •	•		5	
ξ			nber of volunteers (estimate if	-	2010 (1 art 4, 11116	: 2 a) .	•	6	-
t cti	I .		elated business revenue from	• •				7a	
`			ated business taxable income		` ''	• • •		7b	
	<u> </u>	vet unite	ated business taxable income	s HOIII FORM 990	-1, mie 36	· · · · ·	Prior Y		Current Year
		Contribut	tions and grants (Part VIII line	15\		-	- 111011	\	A)
ne	1		tions and grants (Part VIII, line			• -			
Revenue	Į.	_	service revenue (Part VIII, line			•		/	50,450
Re	ı		nt income (Part VIII, column (A	•	•	• •		666	
	1		venue (Part VIII, column (A), lin		•		A 600	507	262,576
			enue – add lines 8 through 11 (ne 12)	A 4 1)	#/2	3/3,026
			nd similar amounts paid (Part			· ·		0	
			paid to or for members (Part I			_ ·		0	
es	ř.		other compensation, employee			5–10)		<u>Q</u>	6
Expenses			onal fundraising fees (Part IX,					0	<u> </u>
ă	ЬТ	Total fund	draising expenses (Part IX, co	lumin (D))Aline125	ra		ا د ادر الرواد الم		は古代の一個などの
			oenses (Part IX, column (A), li				201,7	32	310,28%
2	18 7	Total exp	enses Add lines 13-17 (mus	equal Carper	olumn (A), line 25	i)	201,	122	310,28%
2	19 F	Revenue	less expenses Subtract line	18 from line 12	***************************************		تبدخف	151	2,740
Net Massets on Fund Balafices						В	eginning of C		End of Year
alan			ets (Part X, line 16)			· <u>[1</u>	, 734,	321	2,100,518
뚫			ilities (Part X, line 26)			· <u>L</u>			
			ts or fund balances. Subtract	line 21 from line	20	<u> (</u>	1934	321	2,100,518
	art II		ture Block						
ψ'n	der penalti	es of perju	ry, I declare that I have examined this	return, including acc	ompanying schedules	s and statem	ents, and to	the best of n	my knowledge and belief, it is
<u>Trù</u>	e, correct,	and compl	ete Declaration of preparer (other that			cn preparer	nas any know	riedge	
5				A cloud.	·				
Şįg	n	Sygn	ature of officer	- 1	1			ate /	1,0
He	re	NA	JOSEDL M Dr	0200W5	Ki, Trea.	5 wre	r4	1122	2//4
]	Туре	or print name and title	- 	7				7
 Pa	:d	Print/Ty	pe preparer's name	Preparer's signatur	e	Dat	e	Check	T If PTIN
		.]		1				self-emp	—
	eparer	1	ame ▶	<u> </u>			Fire	n's ElN ▶	
US	e Only		ddress ▶					one no	
May	the IRS		s this return with the preparer	shown above? (see instructions)			orie IIO	Yes No
via:	Danas III	o discuss	etian Act Notice see the separe		Joe manachoris)	· · ·	440004	· · · · ·	

	<u> </u>										
Part											
1	Check if Schedule O contains a responsible the organization's mission.										
ı	We are A holding of Columbius C SACILITIES SOL	UGEOMAANY	for Knight	5							
	05 Columbius C	BUNCI1 5480	· We prodide								
	5AC1/1+185.501	civic clubs 1	N Neuport Ne	US							
2	Did the organization undertake any signific										
2	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?											
_	If "Yes," describe these changes on Sched										
4	Describe the organization's program service expenses Section 501(c)(3) and 501(c)(4) of the service of the serv	ce accomplishments for each of its	three largest program services, tithe amount of grants and alloc	as measured by							
	the total expenses, and revenue, if any, for		t the amount of grants and anot	ations to others,							
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)							
											
											
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)							
		•••••									
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			·····								
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40	(Code) (Expenses \$	including grants of ¢	\/Doyonyo ¢								
4c	(Code) (Expenses \$	including grants of \$) (Nevende \$)							
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		·									
A .1	Other program continue (December of Columbia	ula O \									
4d	Other program services (Describe in Sched (Expenses \$ including gran		\$								
4e	Total program service expenses ►	/ // // // // // // // // // // // // /	<u> </u>	·							

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	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		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	3		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	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		X
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		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	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		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	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		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	11b		X
С	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	11c		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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		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	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		×
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (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		χ
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		X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II .	21		X
		Form	990	(2018)

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cklist of Required Schedules (continued)

ميين	Checking of Nequired Gonedies (Continued)			
00	Did the assessment many than \$5,000 of agents as other assets as \$1,000 of agents		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		$\overline{\times}$
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		× _
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	04.5		X
b	through 24d and complete Schedule K. If "No," go to line 25a	24a 24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
d	to defease any tax-exempt bonds?	24c 24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	2 5b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		×
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		×
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):		R	.a
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		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		Χ
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		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
Ь	If "Yes" to line 35a, 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		
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		×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38		
Part				
		<u> </u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a	Lugari ale		MULA
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1264 1c	73	

<u>'art</u>	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
•	5 to the comban of condenses arounded as Form W.O. Townson W.J. (West of J.T.)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			1
	Statements, filed for the calendar year ending with or within the year covered by this return [2a]	- 20	*******	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?.	2b	224	
2-	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? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3a 3b		X
b		30		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		×
b	If "Yes," enter the name of the foreign country: ▶	- 23	47.4	gt., 1
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	100	17	7
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .	5a		ス
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
С	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 solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	Le.	,	Ş,
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	<u> </u>	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
đ	If "Yes," indicate the number of Forms 8282 filed during the year	سنعا	<u> </u>	,,,,,
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		×
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		-
	Section 501(c)(7) organizations. Enter.	9b	 	-
	Initiation fees and capital contributions included on Part VIII, line 12	1	42	
a h	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
1	Section 501(c)(12) organizations. Enter:		쬁	
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources	200	1	
_	against amounts due or received from them)			
2a	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		3	
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	3	30	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			3,624
	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			
	Enter the amount of reserves on hand			1
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	<u> </u>	ļ
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1		×
	excess parachute payment(s) during the year?	15		
	If "Yes," see instructions and file Form 4720, Schedule N		ž T	*
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	ا	
	If "Yes," complete Form 4720, Schedule O.		1	200

5480 Club INC 54-0788156

Form	aan	(2018)

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? 11a 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. 12a 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 was done 12c Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 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 or 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 take steps to safeguard the organization's exempt status with respect to such arrangements?		a "N	
1a 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 Did any officer, director, frustee, 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 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 become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a 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? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization in a maling address? If Yes, provide the names and addresses in Schedule O 10a Did the organization have local chapters, branches, or affiliates? 10b If Yes, did the organization have written policies and procedures governing body before ling the form? 10c Did the organization have a written operations are consistent with the organization's exempt purposes? 11a Has the organization have a written operations are consistent with the organization by the internal Revenue C 10b the organiza	struc	tions	}. ─
It 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 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 have a family relationship or a business relationship with any other officer, director, in trustee, or key employee share a family relationship or a business relationship with any other officer, director, in trustee, or key employees to a management company or other person? 3 Did the organization delegate control over management duties customanly 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 have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 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? 6 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 7 The governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization is mailing address? If "Yes," rovide the names and addresses in Schedule O 10 Did the organization have local chapters, branches, or affiliates? 10 Did the orga	:_	L	ᆚ
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with a taxable entity during the year?			1
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organization's exempt status with respect to such arrangements?	1	ı	1
Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ 18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Se		_	_
 List the states with which a copy of this Form 990 is required to be filed ► Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Se 	<u> </u>		
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Se			
(3)s only) available for public inspection, Indicate how you made these available. Check all that apply,	ction	501	(c)
Own website Another's website 🔀 Upon request 🗌 Other (explain in Schedule O)			
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest	polic	су, а	nd
financial statements available to the public during the tax year			
20 State the name, address, and telephone number of the person who possesses the organization's books and record	; >		
Toseph in Drozdowski, TREASURER, 757-930-0491			

5480 Club INC 54-0788156

Form 990 (2018)

Part VII

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

•	mine percent a commercial a	
(Check if Schedule O contains a response or note to any line in this Part VII	_
		_

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.

- 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 r		ited o	rga	nıza	tion	on con	npe	nsated any cu	rrent officer, director	ector, or trustee
(A) Name and Title	(B) Average hours per week (list any	(do n box, t office	ot ch unles	Pos neck ss pe d a d	c) ition more rson irecti	than on the thick the thic	one an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) John Edwards: President (2) Alberto Blos	10			×						L
(2) Alberto Plos	10		i	ж.				,		
Recorder	6			X				Ĵ		
HTTOE Drozoowski	10			×						
15) JOHN SKrgent Director	6			×				1		
(6) Burnie Guilach	٨			×						
7) Toe Rojer	-6			×						
(B) KEUIN GONECLL	9			۴		(E		
19 Robie DeBACTELO	4			×				·		
Director:	4			X					_	
(11)									_	-
(12)										
(13)										
(14)						_				
					!			<u> </u>	,	ı

Form 990 (2018)

5480 Club INC 54-0788156

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	/ees	s, ar	nd F	lighes	st C	ompensated E	mployees (cor	tinued)	Page O
	(A) Name and title	(B) Average hours per week (list any	box, u	unles er and	Pos leck s pe	more rson irect	than o	an ee)	(D) Reportable compensation from	(E) Reportable compensation fro related	4	(F) timated nount of other
		hours for related organizations below dotted line)		nstitutional truslee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	fr org and	pensation om the anization d related anizations
(15)								ļ. <u></u>			1	
(16)					_							
(17)							_		-			
(18)												·
(19)							_					
(20)												
(21)												
(22)												
(23)												
(24)												-
(25)												
С	Sub-total	VII, Sectio	n A					> > >				
2	Total number of individuals (including but reportable compensation from the organi		l to th	ose	list	ed a	above	e) w	ho received m	ore than \$100,	000 of	
3	Did the organization list any former of employee on line 1a? If "Yes," complete 5							emp	oloyee, or high	nest compens	ated . 3	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual.											
5	Did any person listed on line 1a receive of for services rendered to the organization?									zation or indivi	<u> </u>	
Section	on B. Independent Contractors										<u> </u>	
1	Complete this table for your five highest of compensation from the organization. Replyear.											
	(A) Name and business add	ress				••			(B) Description of s	services	(C Compe	
	NO Compe	NSA	110	2/	U			_				
	All Volunto	sel?	5_									
	Total number of independent contracto	re (includir	na bu	t n	ot I		od to		acco listed ab	ove) who		Name of the Party

received more than \$100,000 of compensation from the organization ▶

5480 club INC 540788-156

Form 9	90 (201	5486 011		_/		1 70	Page 9
	WIII	Statement of Revenue	·····			·	
		Check if Schedule O contains a resp	ponse or note to	o any line in this	Part VIII		🗆
				(A) I otal revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(C) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaigns 1a	Q		注解验者的企 由	THE STATE OF THE S	
Grants	ь	Membership dues 1b	0				
ts, (С	Fundraising events 1c	0				
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations 1d	0				
ns, Sim	e	Government grants (contributions) 1e	0				
er t	f	All other contributions, gifts, grants, and similar amounts not included above	0				
<u></u>	_	Noncash contributions included in lines 1a–1f \$					
on but	g h	Total. Add lines 1a–1f	-				
		rotal Add mies to the	Business Code	1275761248	The second second	Control of the Control	
Program Service Revenue	2a)		Productive Serve Observed	AND SHOW OF THE STREET	Server Section (Carried California)	Tresting of the strains the board
Be	ь	***************************************				_	
vice	С						
Ser	d		, , , , , , , , , , , , , , , , , , , ,				
ä	е						
rogr	f	All other program service revenue.			San realization area. Found that south	1 throughout of the American and	and stands as to the state of t
	<u>g</u> 3	Total. Add lines 2a–2f	b		TATEL STATE OF THE	STATE OF THE PARTY	
	٠	and other similar amounts)	enas, interest,				
	4	Income from investment of tax-exempt be	and proceeds				<u> </u>
	5	Royalties	>				
		(i) Real	(II) Personal		PASSES SE		
	6a	Gross rents 13 8/0	233600				
	b	Less rental expenses					
	^ C	Rental income or (loss) 73-81-0	233600		并成为第二段		
i	ď	Net rental income or (loss)		247,410			
	7a	Gross amount from sales of (i) Securities	(II) Other				
		assets other than inventory	0				
	b	Less. cost or other basis and sales expenses.	0.				
	С	Gain or (loss)	0				
	1 -	Net gain or (loss)		O	AN ARM WEST STATE STATE	Water Sales Sales Committee	
	-						
Other Revenue	8a	Gross income from fundraising					
Ver		events (not including \$					
Re		of contributions reported on line 1c)	A				
her		See Part IV, line 18	0				
ŏ	b	Less. direct expenses b			CANTON TO THE CONTRACT OF	爱加斯特斯斯特	
	с 9а	Net income or (loss) from fundraising Gross income from gaming activities.	events . >			CONTROL THE CONTROL	
	Ja	See Part IV, line 19	a				
	b	Less direct expenses b	8				
	c	Net income or (loss) from gaming acti	vities ►	0	AND	The second of th	(2. 水氷 3. でいだしいとかなながます。」があるからいます。
	J	Gross sales of inventory, less				104100	
		returns and allowances a					
	b	Less: cost of goods sold . b		国工程的			
	С	Net income or (loss) from sales of inve	entory .	0			
-		Miscellaneous Revenue	Business Code	MARKET STATE	With the second	经过程的	
	11a						<u> </u>
	b			 			
	C بہ	All other revenue		63 6/6		 	
	ď	All other revenue		W 013	1	1	I

d All other revenue . . .e Total. Add lines 11a-11d .

Total revenue. See instructions

Form 990 (2018) 5480 Club INC 54-0788156

Part IX Statement of Functional Expenses				
Falt IX Statement of Functional Expenses	<u> </u>			
Section 501(c)(3) and 501(c)(1) organizations must co	mplete all columns. /	All other organization	ns must complete co	olumn (A).
Check if Schedule O contains a respo	nse or note to any li	ne in this Part IX		
Do not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
8h 9h and 10h of Part VIII	Total expenses	Program service	Management and	Fundraising

	Check if Schedule O contains a respor	nse or note to any li	ne in this Part IX		
	ot include amounts reported on lines 6b, 7b, b, 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 domestic organizations and domestic governments. See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0			
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0		W CONSTRUCT	KEISKEISKEISKEISKEISKEISKEISKEISKEISKEIS
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 8	Other salaries and wages	0			
9	Other employee benefits	Q			
10	Payroll taxes			•	
11	Fees for services (non-employees):	\circ			
a b	Management	0			
c	Accounting	0			
d	Lobbying	Ŏ			
е	Professional fundraising services See Part IV, line 17	0	ASSESSED TO THE SAME	创作的数据的	
f	Investment management fees	- O			-+
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0			
12	Advertising and promotion	0			-
13	Office expenses	8			
14	Information technology	0			
15	Royalties	0			
16 17	Occupancy	- 8			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0_			
22	Depreciation, depletion, and amortization	7.6			
23	Insurance	20,700	AGRICUANA, E 1 MAN MAN ARRA A	mineral a think by Theatree do by	All Adres Sales Sales Service Service as Dispers
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column			ATT CAN	
	(A) amount, list line 24e expenses on Schedule O)				
а	wtitilities, 945, water el-c.	70,009		74	THE C. MANUAL MAIN CO. LANS AND ASS. To. and
b	scuage, etc.				
С	JANITORIAL SETUICES.	87,150			
d	Build AND Grouds	78,730			
e	All other expenses - See Attache Total functional expenses. Add lines 1 through 24e	33,647			
25 26	Joint costs. Complete this line only if the	310,786			
20	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation Check here				
	following SOP 98-2 (ASC 958-720)				
				<u>-</u>	Form 990 (2018)

Part X: Balance Sheet

5480 Club INC 54-6788156

	`	Check if Schedule O contains a response or note to any line in this Pa	ırt X		🗍
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	2210	1	17,078
	2	Savings and temporary cash investments	0	2	
	3	Pledges and grants receivable, net	()	3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees			
	_	Complete Part II of Schedule L	E Trus did. P its second was about	5	The size who in the same state of the same state
	6	Loans and other 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			
Assets	7	organizations (see instructions) Complete Part II of Schedule L	<u>()</u>	<u>6</u> 7	0
As	8	Inventories for sale or use		8	
,	9	Description and defended the con-		9	
	10a	Land, buildings, and equipment cost or	the section of the section	tive like	LOCAL AND MAN AND THE STATE OF
		other basis Complete Part VI of Schedule D 10a			
		Less accumulated depreciation . [10b]	1,100,000	10c	11/00,000
	11	Investments—publicly traded securities	832,111	11_	983,500
	12	Investments—other securities See Part IV, line 11	Q	12	0
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16 17	Total assets. Add lines 1 through 15 (must equal line 34)	119341301	16	2,100,5.18
	18	Accounts payable and accrued expenses		17	
_	·19	Deferred revenue		18 19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D.		21	
S	22	Loans and other payables to current and former officers, directors,	The Control of the Co	A Parti	Her Market Market Control of the
Liabilities	22	trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
Ľ	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	,	24	
	25	Other liabilities (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	2010	26	17070
\dashv		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and	TO THE PARTY OF TH	20	
ces		complete lines 27 through 29, and lines 33 and 34.			
lan	27	Unrestricted net assets		27	
Ba	28	Temporarily restricted net assets		28	
pu	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			
ž	30	Capital stock or trust principal, or current funds	832,111	30	987.500
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund	1,100,060	31	1,100,000
۲	32	Retained earnings, endowment, accumulated income, or other funds.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	32	, , ,
Ne	33	Total net assets or fund balances	1932111	33	2,083,500
	34	Total liabilities and net assets/fund balances	1,932,111	34	2083,500
			,		Form 990 (2018)

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5480 Club INC 54-0788156.

Form 9	90 (2018)				Pag	ge 12
Par	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>		<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1_	3/	3,0	クエ	6
2	Total expenses (must equal Part IX, column (A), line 25)	2	31	Oci	28	6_
3	Revenue less expenses. Subtract line 2 from line 1	3_		21	4	<u>Õ</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	20	83.	50	0
5	Net unrealized gains (losses) on investments	5_				
6	Donated services and use of facilities	6_				
7	Investment expenses	7_				
8	Prior period adjustments	8_				
9	Other changes in net assets or fund balances (explain in Schedule O)	9_				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line		2,08	7 T	24	10
	33, column (B)) XII Financial Statements and Reporting	10	400	<u> </u>	<u>, , , </u>	
ran	Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII					
	Check is defied the decontains a response of note to any line in this Part XII	· · ·	<u>· · · </u>		Yes	No
1	Accounting method used to prepare the Form 990		Г		162	140
•	If the organization changed its method of accounting from a prior year or checked "Other," exp	olain	<u> </u>	. 35.	. 4	. 1
	Schedule O.	<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	"' ,		, x	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	olled	or 🖟	1.	(a ;	و بنوت.
	reviewed on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis				أحتنا	
р	Were the organization's financial statements audited by an independent accountant?		<u></u> ⊢	2b		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on	a .	, þ		1
	separate basis, consolidated basis, or both			1	ì	
	Separate basis Consolidated basis Both consolidated and separate basis		ç			
C					1	
	of the audit, review, or compilation of its financial statements and selection of an independent accou		_	2c		
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın	in	1	: `:	- 1
_	Schedule O.		-			أسسسة
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	1			
	the Single Audit Act and OMB Circular A-133?) —	3a		
b				<u>, </u>		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such at	Jaits.	- 1	3ь	1	

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number Club 5480 Club INC Provides