Department of the Treasury

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation)

OMB No 1545-0047

Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service and ending For the 2009 calendar year, or tax year beginning COLUMBUS CLUB OF NEW HYDE PARK, INC D Employer identification number Check if applicable C Name of organization use IRS Address change Doing Business As 11-2256594 label or orint or Name change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number type. Initial return 1000 MARCUS AVENUE Specific Terminated City or town, state or country, and ZIP + 4 Instruc-11040-2130 G Gross receipts \$ 384,585 NEW HYDE PARK NY Amended return tions Yes X Application pending Name and address of principal officer: H(a) Is this a group return for affiliates? H(b) Are all affiliates included? if "No," attach a list (see instructions) Tax-exempt status: 501(c) (10) **◄** (insert no) 4947(a)(1) or 527 J Website: ▶ H(c) Group exemption number ▶ L Year of formation K Form of organization Other -M State of legal domicile Corporation Trust Association Part I Summary Briefly describe the organization's mission or most significant activities: SCANNEDAPR 15 2010 2 Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) . . . 0 5 0 Total number of volunteers (estimate if necessary) 6 Total gross unrelated business revenue from Part VIII, column (C), line 12... 7a Net unrelated business taxable income from Form 990-T, line 34. 7b -39,396 **Current Year** Contributions and grants (Part VIII, line 1h). 0 8,000 8 9 8,888 7,200 Program service revenue (Part VIII, line 2g) 10 4.734 2,170 Investment income (Part VIII, column (A), lines 3, 4, and 7d). 254.644 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 219,960 268,266 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . 237,330 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) **₹10a** Professional fundraising fees (Part IX, column (A), line 11e) 0 Total fundraişing expenses (Part IX, column (D), line 25) ▶ 0 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f) 300,861 290,497 Total expenses, Add lines 13–17 (must equal Part IX, column (A), line 25) . . 300,861 290,497 -53,167 19 Revenue less expenses. Subtract line 18 from line 12. -32,595 **Beginning of Current Year** End of Year Total assets (Part X, line 16) . . . 905.015 1,173,533 21 Total liabilities (Part X, line 26) 22,763 52,259 Net assets or fund balances. Subtract line 21 from line 20 1.121.274 882,252 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Date Here WILLIAM J. McDONALD KEASURER Type or pnnt name and title Preparer's Check if Preparer's identifying number signature (see instructions) Paid ► X 2/22/2010 employed Preparer's Firm's name (or yours SAUL W. SIEGE EIN **Use Only** if self-employed), 10738 ROYAL CARIBBEAN CIRCLE, BOYNTON BEACH, FL

Form 990 (2009

	990 (2009) COLUMBUS CLUB OF NEW HTDE PARK, INC	11-2230394	Page Z
_Pa	It III Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission:		
2	Did the organization undertake any significant program services during the year which were not listed on		
_	the prior Form 990 or 990-EZ?		V No
	If "Yes," describe these new services on Schedule O.	. [_] 163	
_			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		г о л
	services?	· Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organization's three largest program services		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the am	ount of grants a	and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 0 including grants of \$ 0) (Revenue	\$	0)

			-

4b	(Code:) (Expenses \$ 0 including grants of \$ 0) (Revenue	\$	0)
	•		
		 	
			
4c	(Code: 0 including grants of \$ 0) (Revenue	\$	0)
			
			
	•••••••••••••••••••••••••••••••••••••••		
			· • • • • • • • • • • • • • • • • • • •
4d	Other program services. (Describe in Schedule O.)		
	(Expenses \$ 0 including grants of \$ 0) (Revenue \$	0)	
40	Total program service expenses • 0		

	•				
orm 8	990 (2099) COLUMBUS CLUB OF NEW HYDE PARK, INC.	11-2256594	4	P	age 3
Par	Checklist of Required Schedules				
		F		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?	·	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? <i>If</i> "Yes," complete Schedule C, Part I		3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schede Part II		4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) n and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			_	
	complete Schedule D, Part I	· · _	6		<u> </u>
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</i> "Yes," complete Schedule D, Part IV		9		×
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or		-		<u> </u>
	quasi-endowments? If "Yes," complete Schedule D, Part V		10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,				
	VII, VIII, IX, or X as applicable] 4	11	ļ	Х
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	Service Servic		0° 4 1	,
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more		7		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	,	` ;		3 4
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	1	-]	, ,]	3
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	, "		+ 4-1	
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets				1 2
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		٦,	7.7	3.5
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part	X.	· \$46.	$f \geq 1$	م با الله الله الله الله الله الله الله ا
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that		,	تداس مغرف	- 3
	addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, F		[;]		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	_	12	<u>; </u>	Х
12A	Was the organization included in consolidated, independent audited financial statements for the tax Yes 2 lf "Yes " completing School to D. Rodo XI. XII. and XIII is entired."	es No X	. (1) (1)		
42	year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.		13		X
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?		13 4a		 ^- -
	Did the organization maintain an office, employees, or agents outside of the Office States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraisin		7 a		
v	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	- 1	4b		Х

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? Did the organization operate one or more hospitals? If "Yes," complete Schedule H.

Form 990 (2009)

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Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			١.,
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	 	X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the	1 00		
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	1		
	organization's current and former officers, directors, trustees, key employees, and highest compensated			V
24-	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	24-		
.	24b through 24d and complete Schedule K. If "No," go to line 25	24a 24b		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240	-	
C		240		1
a	to defease any tax-exempt bonds?	24c 24d	-	
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	240		
254	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	25a		
D	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	1	1	l
	· · · · · · · · · · · · · · · · · · ·	256		l
26	990-EZ? If "Yes," complete Schedule L, Part I	25b		
20	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	1	x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20		 ^
21		1		l
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	27		v
20	If "Yes," complete Schedule L, Part III	27		<u> </u>
28		,		1
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	200		x
	A current or former officer, director, trustee, or key employee? <i>If</i> "Yes," complete Schedule L, Part IV	28a	-	
D	Schedule L, Part IV	206		\ \
_	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a	28b	\vdash	X
C	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,	}		ĺ
	Part IV	200		v
20		28c 29		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	25		 ^
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	20		х
24	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N.	30		 ^-
31		31		v
22	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		v
22	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		X
33	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, Parts II,			 ^
J#	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	 37		-^-
33	Schedule R, Part V, line 2	35	ľ	Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	33		 ^
J-0	organization? If "Yes," complete Schedule R, Part V, line 2	36		İ
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	100		
Ji	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part	-		1
	VI	37		х
20		" -	-	 ^
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	38		
	19? Note. All Form 990 filers are required to complete Schedule O	1 30	اـــــــا	

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable			1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	}		Ι,
	gaming (gambling) winnings to prize winners?	1c		
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 . 2a			١.
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see			
	instructions)	i		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	7,		1 - 3
	this return?	3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	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)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			' - '
	and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	<u>5</u> c		<u> </u>
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?	<u>6a</u>		<u> </u>
þ	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).	-		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	_		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
L	and services provided to the payor?	7a		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		x
	If "Yes," indicate the number of Forms 8282 filed during the year	76		 ^-
d	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1		· '
е	benefit contract?	70		y
•	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		X
١	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		x
g h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	_ <u>, a</u> _		 ^
••	required?	7h		х
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	<u> </u>		
_	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		Х
. 9	Sponsoring organizations maintaining donor advised funds.		-	
а	Did the organization make any taxable distributions under section 4966?	9a		Х
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			l
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities]		1
11	Section 501(c)(12) organizations. Enter:			1
а	Gross income from members or shareholders			· •
b	Gross income from other sources (Do not net amounts due or paid to other sources			'
	against amounts due or received from them.)		i	1
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 12b			<u></u>

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

Sect	ion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body	1a	NY	_		,
b	Enter the number of voting members that are independent	1b		3	3.1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business rel	ations	hip with	7		
	any other officer, director, trustee, or key employee?			2		Ĺ.
3	Did the organization delegate control over management duties customarily performed by or u	ınder t	he direct			
	supervision of officers, directors or trustees, or key employees to a management company or			3		
4	Did the organization make any significant changes to its organizational documents since the prior Form 9	90 wa	s filed?	4		
5	Did the organization become aware during the year of a material diversion of the organization	n's ass	ets?	5		
6	Does the organization have members or stockholders?			6		
7a	Does the organization have members, stockholders, or other persons who may elect one or r	поге г	nembers			
	of the governing body?			7a		Ĺ
b	Are any decisions of the governing body subject to approval by members, stockholders, or ot	her pe	rsons?	7b		
8	Did the organization contemporaneously document the meetings held or written actions under	ertaker	during			· ·
	the year by the following:			1.	`	l
а	The governing body?			8a		L
b	Each committee with authority to act on behalf of the governing body?			8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot	t be r	eached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedul	e O .		9a		<u> </u>
Sect	ion B. Policies (This Section B requests information about policies not required by th	e Inte	rnal			
Reve	enue Code.)					
				_	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a		
þ	If "Yes," does the organization have written policies and procedures governing the activities of	of suct	chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization	n? .		10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body by	efore	filing the	1		
	form?			11		
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990			اـــٰـــــــــــــــــــــــــــــــــ		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a		
b	Are officers, directors or trustees, and key employees required to disclose annually interests	that c	ould give	1		}
	rise to conflicts?			12b		
C	Does the organization regularly and consistently monitor and enforce compliance with the po	licy? /	f "Yes,"	-		}
	describe in Schedule O how this is done			12c		
13	Does the organization have a written whistleblower policy?			13		
14	Does the organization have a written document retention and destruction policy?			14		<u> </u>
15	Did the process for determining compensation of the following persons include a review and			1,	1	`
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	ration	and decision?	1		*
а	The organization's CEO, Executive Director, or top management official			15a		<u>L</u>
b	Other officers or key employees of the organization	•		15b	L_	<u> </u>
				1	-1] -
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar a	arrang	ement		-	-
	· · · ·			16a		<u> </u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization				,	١.
	its participation in joint venture arrangements under applicable federal tax law, and taken ste			1		,
	the organization's exempt status with respect to such arrangements?	<u> </u>	<u> </u>	16b		<u> </u>
Sect	ion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ► NY					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, at	nd 99()-T (501(c)(3)s	only)		
	available for public inspection Indicate how you make these available. Check all that apply.					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents of the control	nents	conflict of inte	rest		
	policy, and financial statements available to the public.					
20	State the name, physical address, and telephone number of the person who possesses the b	ooks	and records of	the		
	organization: ► COLUMBUS CLUB OF NEW HYDE PARK, INC		516-352-28	52		
	1000 MARCUS AVNE, 11040-2130					

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

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

(A)	(B)			(6	C)			(D)	(E)	(F)
Name and Title	Average hours per week	Position Individual trustee or director	Institutional trustee	_	_	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Robert Paresi President	As Required			x				0	0	
Thomas J. McGowan V. President	As Required			х				0		
William McDonald Treasurer	1			x				0	0	
Francis M Goodwin Secretary	As Required			X				0	0	
_										
			T	<u> </u>	 		\vdash			

Pai	t VII Section A. Officers, Directors, Tru	istees, Key E	mploy	ees	and	Hig	phesi	t Co	mpensated Em	ployees (continu	ed)	
	(A)	(B)			(6	C)			(D)	(E)		(F))
3 Did em 4 For the indi 5 Did ser Section 1 Cor	Name and title	Average hours per week	or director	Institutional trustee	Officer		a Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reporta compens from rela organizal (W-2/1099-	ation ated tions	Estima amour othe compen- from organiz and rel organiza	nt of er sation the ation ated
										<u> </u>			
					<u> </u>								_
													
						<u> </u> 							
				_			<u> </u>						
		<u> </u>	· ·	<u>.</u>	<u></u> .	•	<u> </u>	<u>. •</u>	0		0		
2	Total number of individuals (including but no reportable compensation from the organizat		ose list	ted a	ovods 0	e) wi	ho re	ceiv	ed more than \$1	00,000 in			
	Teportable compensation nom the organizati	1011							·			Yes	No
3	Did the organization list any former officer, employee on line 1a? If "Yes," complete Sci							_	st compensated		3		X
4	For any individual listed on line 1a, is the su the organization and related organizations g],	,
	individual							•			4		X
5	Did any person listed on line 1a receive or a services rendered to the organization? If "You									<u> </u>	5	J	x
	tion B. Independent Contractors												
1	Complete this table for your five highest concompensation from the organization.	npensated ind	epend 	ent d	contr	acto	ors the	at re	ceived more tha	in \$100,00	10 of 		
	(A) Name and business a	ddress	<u>. </u>						(B) Description of ser	vices	Com	(C) pensation	
								<u> </u>					
								 					
2	Total number of independent contractors (in more than \$100,000 in compensation from t			ed to	thos	se lis	sted a		e) who received				

Total. Add lines 11a-11d

Total revenue. See instructions. .

0

237.330

11-2256594

Part IX Statement of Functional Expenses

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

	All other organizations must complete column	(A) but are not rec			יום (ט).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	0			,
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	o			
3	Grants and other assistance to governments,			,	
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	ol			-
4	Benefits paid to or for members	0			•
5	Compensation of current officers, directors,				
•	trustees, and key employees	o			
6	Compensation not included above, to disqualified				
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	ol			
7	Other salaries and wages	0			
8	Pension plan contributions (include section 401(k)				
-	and section 403(b) employer contributions)	o			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (rion-employees):	-			
	Management	o			
a b	Legal	0	· · · · · · · · · · · · · · · · · · ·		
		0			
C	Accounting	0			
ď	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other				
12	Advertising and promotion	0			·
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0	·····		
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	0			ļ. <u></u>
24	Other expenses. Itemize expenses not		•		
	covered above. (Expenses grouped together	•			,
	and labeled miscellaneous may not exceed			Ŧ	-
	5% of total expenses shown on line 25 below.)			<u>.</u>	
а	SCHEDULE	290,137			
b		0			
С		0			
d		0			
е		0		-	
f	All other expenses	0			
<u> 25</u>	Total functional expenses. Add lines 1 through 24f	290,137	0	0	0
26	Joint costs. Check here ▶ if following	,			
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising				
	solicitation	}		1	

Part X **Balance Sheet** (A) (B) Beginning of year End of year 26.582 1 33.638 2 119,385 82,063 2 3 0 3 0 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 0 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 0 6 0 7 11,439 8 11.439 8 Inventories for sale or use . 28,297 19,305 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D Less: accumulated depreciation . . . 10b 987.830 758.570 10c 11 0 11 ol 12 12 Investments—other securities. See Part IV, line 11 ol 13 0 13 Investments—program-related. See Part IV, line 11 0 0 14 14 15 0 0 15 16 1,173,533 16 905,015 17 10,633 17 19,263 18 18 19 19 20 20 Tax-exempt bond liabilities 3.500 3,500 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 22 38.126 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 24 Unsecured notes and loans payable to unrelated third parties 0 0 25 25 52,259 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here ▶ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted riet assets 27 27 28 28 Temporarily restricted net assets. Permanently restricted net assets. Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 32 Retained earnings, endowment, accumulated income, or other funds. 882,252 33 935,571 33 987,830 905,015 34

Form 990 (2009)

If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form **990** (2009)

3b

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