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Return of Organization Exempt From Income Tax

OMB No 1545-0047

2005

Open to Public Inspection

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

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

A For the 2005 calendar year, or tax year beginning 7/01, 2005, and ending 6/30, 2006

- B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return
- ☐ Amended return
- ☐ Application pending

Please use
IRS label
or print
or type.
See
specific
instructions.KNIGHTS OF COLUMBUS DECATUR COUNCIL #577
P.O. BOX 1303
DECATUR, IL 62525

D Employer Identification Number

37-0242115

E Telephone number

217-422-2624

F Accounting method

☐ Cash☒ Accrual

Other (specify) ▶

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Web site: ▶ N/A

J Organization type (check only one)

☒ 501(c) 8 (insert no) ☐ 4947(a)(1) or ☐ 527

K Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 198,407.

H and I are not applicable to section 527 organizations

H (a) Is this a group return for affiliates? ☐ Yes ☒ No

H (b) If 'Yes,' enter number of affiliates ▶

H (c) Are all affiliates included? ☐ Yes ☐ No

(If 'No,' attach a list See instructions)

H (d) Is this a separate return filed by an organization covered by a group ruling? ☒ Yes ☐ No

I Group Exemption Number ▶ 0188

M Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Instructions)

1 Contributions, gifts, grants, and similar amounts received:

a Direct public support

1a 6,924.

b Indirect public support

1b

c Government contributions (grants)

1c

d Total (add lines 1a through 1c) (cash \$ 6,924. noncash \$)

1d 6,924.

2 Program service revenue including government fees and contracts (from Part VII, line 93)

2

3 Membership dues and assessments

3 18,462.

4 Interest on savings and temporary cash investments

4 11,591.

5 Dividends and interest from securities

5

6a Gross rents

6a

b Less rental expenses

6b

c Net rental income (loss) (subtract line 6b from line 6a)

6c

7 Other investment income (describe)

7

8a Gross capital gain from sales of assets other than inventory

(A) Securities

(B) Other

62,376.

8a

b Less cost or other basis and sales expenses

66,093.

8b

c Gain or (loss) (attach schedule) STATEMENT 1

-3,717.

8c

d Net gain or (loss) (combine line 8c, columns (A) and (B))

8d -3,717.

9 Special events and activities (attach schedule) If any amount is from gaming, check here ☐

a Gross revenue (not including \$ of contributions reported on line 1a)

9a 99,054.

b Less direct expenses other than fundraising expenses

9b 110,549.

c Net income or (loss) from special events (subtract line 9b from line 9a)

STATEMENT 2

9c -11,495.

10a Gross sales of inventory, less returns and allowances

10a

b Less cost of goods sold

10b

c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)

10c

11 Other revenue (from Part VII, line 103)

11

12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)

12 21,765.

13 Program services (from line 44, column (B))

13 9,318.

14 Management and general (from line 44, column (C))

14 13,101.

15 Fundraising (from line 44, column (D))

15

16 Payments to affiliates (attach schedule)

16

17 Total expenses (add lines 16 and 44, column (A))

17 22,419.

18 Excess or (deficit) for the year (subtract line 17 from line 12)

18 -654.

19 Net assets or fund balances at beginning of year (from line 73, column (A))

19 465,060.

20 Other changes in net assets or fund balances (attach explanation)

SEE STATEMENT 3

20 -43,710.

21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)

21 420,696.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

TEEA0109L 02/03/06

Form 990 (2005)

0436876703 MAR 11 2010 POSTMARK DATE FEB 24 2010

Statute Cleared APR 07 2010

RECEIVED

MAR 09 2010

TPR BRANCH OGDEN

GOVERNMENT

UNIT

RECEIVED

STATUTE UNIT

P ONE

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (att sch) SEE STM 4 (cash \$ 9,318. non-cash \$) If this amount includes foreign grants, check here ☐	22 9,318.	9,318.		
23	Specific assistance to individuals (att sch)	23			
24	Benefits paid to or for members (att sch)	24			
25	Compensation of officers, directors, etc	25 2,603.	0.	2,603.	0.
26	Other salaries and wages	26			
27	Pension plan contributions	27			
28	Other employee benefits	28			
29	Payroll taxes	29 644.		644.	
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33 335.		335.	
34	Telephone	34			
35	Postage and shipping	35 1,351.		1,351.	
36	Occupancy	36			
37	Equipment rental and maintenance	37			
38	Printing and publications	38			
39	Travel	39			
40	Conferences, conventions, and meetings	40			
41	Interest	41			
42	Depreciation, depletion, etc (attach schedule)	42			
43	Other expenses not covered above (itemize)				
a	SEE STATEMENT 5	43a 8,168.		8,168.	
b		43b			
c		43c			
d		43d			
e		43e			
f		43f			
g		43g			
44	Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	44 22,419.	9,318.	13,101.	0.

Joint Costs. Check ☐ if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?

☐ Yes ☒ No

If 'Yes,' enter (i) the aggregate amount of these joint costs \$; (ii) the amount allocated to Program services

\$, (iii) the amount allocated to Management and general \$, and (iv) the amount allocated to Fundraising \$

BAA

Form 990 (2005)

Part III Statement of Program Service Accomplishments

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► SEE STATEMENT 6

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, but optional for others.)

a CHARITABLE CONTRIBUTIONS

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐

9,018.

b HALLOWEEN PARTY, EASTER PARTY

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐

300.

c

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐

d

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐

e Other program services

(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐

f Total of Program Service Expenses (should equal line 44, column (B), Program services)

9,318.

BAA

Form 990 (2005)

Part IV Balance Sheets (See Instructions)**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year
ASSETS	45 Cash — non-interest-bearing	38,140.	45	27,967.
	46 Savings and temporary cash investments	301,196.	46	264,557.
	47 a Accounts receivable	47 a		
	b Less: allowance for doubtful accounts	47 b	47 c	
	48 a Pledges receivable	48 a		
	b Less: allowance for doubtful accounts	48 b	48 c	
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51 a Other notes & loans receivable (attach sch)	51 a 128,171.		
	b Less allowance for doubtful accounts	51 b	125,724.	51 c 128,171.
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54 Investments — securities (attach schedule)	☐ Cost ☐ FMV	54	
	55 a Investments — land, buildings, & equipment basis	55 a		
	b Less accumulated depreciation (attach schedule)	55 b	55 c	
56 Investments — other (attach schedule)		56		
57 a Land, buildings, and equipment: basis	57 a			
b Less accumulated depreciation (attach schedule)	57 b	57 c		
58 Other assets (describe ► <u>SEE STATEMENT 7</u>)		58	1.	
59 Total assets (must equal line 74). Add lines 45 through 58	465,060.	59	420,696.	
LIABILITIES	60 Accounts payable and accrued expenses		60	
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64 a Tax-exempt bond liabilities (attach schedule)		64 a	
	b Mortgages and other notes payable (attach schedule)		64 b	
	65 Other liabilities (describe ► _____)		65	
66 Total liabilities. Add lines 60 through 65	0.	66	0.	
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here ☐ and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted		67	
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here ☒ and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds	465,060.	70	420,696.
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19, column (B) must equal line 21)	465,060.	73	420,696.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73	465,060.	74	420,696.

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Form 990 (2005)

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See instructions.)

a	Total revenue, gains, and other support per audited financial statements		a	N/A
b	Amounts included on line a but not on Part I, line 12			
	1 Net unrealized gains on investments	b1		
	2 Donated services and use of facilities	b2		
	3 Recoveries of prior year grants	b3		
	4 Other (specify): _____	b4		
	Add lines b1 through b4		b	
c	Subtract line b from line a		c	
d	Amounts included on Part I, line 12, but not on line a :			
	1 Investment expenses not included on Part I, line 6b	d1		
	2 Other (specify): _____	d2		
	Add lines d1 and d2		d	
e	Total revenue (Part I, line 12) Add lines c and d		e	

Part IV-B	Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
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a	Total expenses and losses per audited financial statements		a	N/A
b	Amounts included on line a but not on Part I, line 17			
	1 Donated services and use of facilities	b1		
	2 Prior year adjustments reported on Part I, line 20	b2		
	3 Losses reported on Part I, line 20	b3		
	4 Other (specify) _____	b4		
	_____ Add lines b1 through b4		b	
c	Subtract line b from line a		c	
d	Amounts included on Part I, line 17, but not on line a :			
	1 Investment expenses not included on Part I, line 6b	d1		
	2 Other (specify) _____	d2		
	_____ Add lines d1 and d2		d	
e	Total expenses (Part I, line 17) Add lines c and d		e	

Part V-A **Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

[illegible]

	Yes	No
--	-----	----

--	--	--

75b		X

75c		X

--	--	--

--	--	--	--

75d	X	
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Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

Part VI	Other Information (See the instructions)	Yes	No
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76		X

77		X

78a	X	
-----	---	--

78b	X	
-----	---	--

79		X

80 a	X	
------	---	--

--	--	--

81 a		0.
------	--	----

81 b		X
------	--	---

Part VI Other Information (continued)

		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
82 b	If 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	N/A	
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
83 b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
84 b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85 a	501(c)(4), (5), or (6) organizations. Were substantially all dues nondeductible by members?	N/A	
85 b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	N/A	
If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year			
85 c	Dues, assessments, and similar amounts from members	N/A	
85 d	Section 162(e) lobbying and political expenditures	N/A	
85 e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	N/A	
85 f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	N/A	
85 g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	N/A	
85 h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	
86 a	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	N/A	
86 b	Gross receipts, included on line 12, for public use of club facilities	N/A	
87 a	501(c)(12) organizations Enter: a Gross income from members or shareholders	N/A	
87 b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	N/A	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Part IX		X
89 a	501(c)(3) organizations Enter: Amount of tax imposed on the organization during the year under section 4911: N/A, section 4912: N/A; section 4955: N/A		
89 b	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' attach a statement explaining each transaction	N/A	
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		N/A	
d Enter: Amount of tax on line 89c, above, reimbursed by the organization		N/A	
90 a	List the states with which a copy of this return is filed: NONE		
90 b	Number of employees employed in the pay period that includes March 12, 2005 (See instructions)	1	
91 a	The books are in care of: JOHN PIRAINO Telephone number: 217-422-2624 Located at: 520 E. NORTH, DECATUR, IL, ZIP + 4: 62523		
91 b	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)? 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 Statements		X
91 c	At any time during the calendar year, did the organization maintain an office outside of the United States? If 'Yes,' enter the name of the foreign country:		X
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year	N/A	

BAA

Form 990 (2005)

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					18,462.
95 Interest on savings & temporary cash invmnts			14	11,591.	
96 Dividends & interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from pers prop					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					-3,717.
101 Net income or (loss) from special events	713200	-11,495.			
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		-11,495.		11,591.	14,745.
105 Total (add line 104, columns (B), (D), and (E))					14,841.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
94	ANNUAL DUES - MEMBERSHIP FEES

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

☐ Yes ☒ No

Note: If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions)

Please Sign Here	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.	
	Signature of officer John F. Prano	Date 02/23/2010
	Type or print name and title John F. Prano, Treasurer	

Paid Preparer's Use Only	Preparer's signature Rei A. Massaro	Date 2/11/10	Check if self-employed ☒	Preparer's SSN or PTIN (See General instruction W) N/A
	Firm's name (or yours if self-employed), address, and ZIP + 4 SIKICH LLP 250 NORTH WATER STREET STE 501 DECATUR, IL 62523	EIN N/A	Phone no (217) 423-6000	

2005

FEDERAL STATEMENTS

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CLIENT 9790

KNIGHTS OF COLUMBUS DECATUR COUNCIL #577

37-0242115

2/09/10

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STATEMENT 1
FORM 990, PART I, LINE 8
NET GAIN (LOSS) FROM NONINVENTORY SALES

PUBLICLY TRADED SECURITIES

GROSS SALES PRICE: 62,376.
 COST OR OTHER BASIS: 66,093.

TOTAL GAIN (LOSS) PUBLICLY TRADED SECURITIES \$ -3,717.

TOTAL NET GAIN (LOSS) FROM NONINVENTORY SALES \$ -3,717.

STATEMENT 2
FORM 990, PART I, LINE 9
NET INCOME (LOSS) FROM SPECIAL EVENTS

<u>SPECIAL EVENTS</u>	<u>GROSS RECEIPTS</u>	<u>LESS CONTRI-BUTIONS</u>	<u>GROSS REVENUE</u>	<u>LESS DIRECT EXPENSES</u>	<u>NET INCOME (LOSS)</u>
PULL TAB FUND	70,970.	0.	70,970.	85,274.	-14,304.
BINGO RECEIPTS	17,215.	0.	17,215.	25,275.	-8,060.
U-PICK-EM	7,319.	0.	7,319.	0.	7,319.
RAFFLE 50/50	3,550.	0.	3,550.	0.	3,550.
TOTAL	\$ <u>99,054.</u>	\$ <u>0.</u>	\$ <u>99,054.</u>	\$ <u>110,549.</u>	\$ <u>-11,495.</u>

STATEMENT 3
FORM 990, PART I, LINE 20
OTHER CHANGES IN NET ASSETS OR FUND BALANCES

TRANSFERS TO COLUMBUS CLUB

TOTAL \$ -43,710.

STATEMENT 4
FORM 990, PART II, LINE 22
GRANTS AND ALLOCATIONS

CASH GRANTS AND ALLOCATIONS

AMOUNT GIVEN: \$ 9,318.

TOTAL GRANTS AND ALLOCATIONS \$ 9,318.

CLIENT 9790

KNIGHTS OF COLUMBUS DECATUR COUNCIL #577

37-0242115

2/09/10

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STATEMENT 5
FORM 990, PART II, LINE 43
OTHER EXPENSES

	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUNDRAISING
ADVERTISING	400.		400.	
BANK SERVICE CHARGES	13.		13.	
BINGO SUPPLIES	1,265.		1,265.	
MEMBERS PROGRAMS	222.		222.	
MISCELLANEOUS	97.		97.	
PER CAPITA TAX	3,454.		3,454.	
RENT	2,617.		2,617.	
SERVICE CHARGE	100.		100.	
TOTAL	\$ 8,168.	\$ 0.	\$ 8,168.	\$ 0.

STATEMENT 6
FORM 990, PART III
ORGANIZATION'S PRIMARY EXEMPT PURPOSE

PROVIDING ACTIVITIES AND ENTERTAINMENT.

STATEMENT 7
FORM 990, PART IV, LINE 58
OTHER ASSETS

ROUNDING

TOTAL 1.
1.

STATEMENT 8
FORM 990, PART V-A
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
MURRAY DICKERSON	TRUSTEE	\$ 0.	\$ 0.	\$ 0.
	0			
ROBERT BURTSCHI P O 71 OREANA, IL 62554	FINL SECRETARY	0.	0.	0.
	0			
STEPHEN CARROLL 1601 N STEVENS AVE DECATUR, IL 62526	GRAND KNIGHT	0.	0.	0.
	0			

2005

FEDERAL STATEMENTS

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CLIENT 9790

KNIGHTS OF COLUMBUS DECATUR COUNCIL #577

37-0242115

2/12/10

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STATEMENT 8 (CONTINUED)

FORM 990, PART V-A

LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
JAMES BRINKOETTER JR. 1170 W. CHELSEA WAY DECATUR, IL 62526	ADVOCATE 0	\$ 0.	\$ 0.	\$ 0.
DAVID BOWMAN	CHANCELLOR 0	0.	0.	0.
JOHN PIRAINO 520 BUCKINGHAM DR DECATUR, IL 62526	TREASURER 0	2,603.	0.	0.
JOE HARDING	TRUSTEE 0	0.	0.	0.
JAMES STAPLES RR 1 BOX 87 LOVINGTON, IL 61937	INSIDE GUARD 0	0.	0.	0.
JAMES HENDREN JR	OUTSIDE GUARD 0	0.	0.	0.
JULIUS SEBOK	WARDEN 0	0.	0.	0.
FRED LOHRSTOFER	RECORDER 0	0.	0.	0.
JOSEPH MEYERS	TRUSTEE 0	0.	0.	0.
VINCE GOGERTY 128 POINT BLUFF DECATUR, IL 62521	DPTY GRND KNIGH 0	0.	0.	0.
	TOTAL	\$ 2,603.	\$ 0.	\$ 0.

2005**FEDERAL WORKSHEETS****PAGE 1****CLIENT 9790****KNIGHTS OF COLUMBUS DECATUR COUNCIL #577****37-0242115**

2/09/10

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COMPUTATION OF CONTRIBUTION CARRYOVER TO 2006

1. TOTAL CONTRIBUTIONS	\$	50,467.
2. CONTRIBUTIONS ALLOWED IN 2005		0.
3. 2000 EXPIRED CONTRIBUTIONS		0.
4. ADJUSTMENTS PER SECTION 170 (D) (2) (B)		0.
5. CARRYOVER TO 2006 (LINE 1 LESS 2, 3, 4)		50,467.

YEAR	CONTRI- BUTION	AMOUNT DEDUCTED IN 2005	TENTATIVE CARRYOVER	AMT CONVERTED TO NOL PER SEC 172 (B) (2)	CARRYOVER TO 2006
2001	\$ 24,671.	\$ 0.	\$ 24,671.	\$ 0.	\$ 24,671.
2002	21,522.	0.	21,522.	0.	21,522.
2003	4,274.	0.	4,274.	0.	4,274.
TOTALS	\$ 50,467.	\$ 0.	\$ 50,467.	\$ 0.	\$ 50,467.

COMPUTATION OF 2005 NET OPERATING LOSS

1. TOTAL INCOME	-11,495.
2. TOTAL DEDUCTIONS	11,835.
3. UNRELATED BUSINESS TAXABLE INCOME (LINE 1 LESS LINE 2)	-23,330.
2005 NET OPERATING LOSS	23,330.