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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 black lung benefit trust or private foundation)

2009

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

<b>A</b> For the 2009 calendar year, or tax year beginning , 2009, and ending , 20	
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>KNIGHTS OF COLUMBUS</b> Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>216 N LIMIT ST</b> City or town, state or country, and ZIP + 4 <b>Lincoln IL 62656</b>
	<b>D</b> Employer identification number <b>37-0369090</b>
	<b>E</b> Telephone number <b>(217) 732-2548</b>
	<b>G</b> Gross receipts \$ <b>257,595</b>
	<b>F</b> Name and address of principal officer: H(a) Is this a group return for affiliates? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(8) (insert no.) <b>4947(a)(1) or 527</b>	
<b>J</b> Website: <b>N/A</b>	
<b>K</b> Form of organization: <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	<b>L</b> Year of formation: <b>M</b> State of legal domicile

<b>Part I Summary</b>	
1 Briefly describe the organization's mission or most significant activities:	
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
ACTIVITIES & GOVERNANCE	3 Number of voting members of the governing body (Part VI, line 1a) <b>3</b>
	4 Number of independent voting members of the governing body (Part VI, line 1b) <b>4</b>
	5 Total number of employees (Part V, line 2a) <b>5</b>
	6 Total number of volunteers (estimate if necessary) <b>6</b>
REVENUE	7a Total gross unrelated business revenue from Part VIII, column (C), line 12 <b>7a</b>
	b Net unrelated business taxable income from Form 990-T, line 34 <b>7b 0</b>
EXPENSES	8 Contributions and grants (Part VIII, line 1h) <b>8</b>
	9 Program service revenue (Part VIII, line 2g) <b>9</b>
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) <b>10</b>
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <b>11</b>
	12 Total revenue -- add lines 8 through 11 (must equal Part VIII, column (A), line 12) <b>12</b>
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) <b>13</b>
	14 Benefits paid to or for members (Part IX, column (A), line 4) <b>14</b>
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) <b>15</b>
	16a Professional fundraising fees (Part IX, column (A), line 11e) <b>16a</b>
	b Total fundraising expenses (Part IX, column (D), line 25) <b>16b</b>
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) <b>17</b>	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) <b>18</b>	
19 Revenue less expenses. Subtract line 18 from line 12 <b>19</b>	
ASSETS OR FUND BALANCES	20 Total assets (Part X, line 16) <b>20</b>
	21 Total liabilities (Part X, line 26) <b>21</b>
	22 Net assets or fund balances. Subtract line 21 from line 20 <b>22</b>

<b>Part II Signature Block</b>	
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.	
<b>Sign Here</b> Signature of officer <b>James F Bode</b> Type or print name and title <b>JAMES F Bode Grand Knight</b>	Date <b>3-1-10</b>
Preparer's signature <b>[Signature]</b> Firm's name (or yours if self-employed), address, and ZIP + 4 <b>H &amp; R BLOCK 1801 N KICKAPOO ST Lincoln, IL 62656</b>	Date <b>2-20-2010</b> Check if self-employed <input type="checkbox"/> Preparer's identifying number (see instr.) <b>000629015</b> EIN <b>37-1173266</b> Phone no. <b>(217) 732-4121</b>

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☒ No

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

SCANNED MAR 30 2010

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**Part 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? .....☐ Yes☒ No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? .....☐ Yes☒ No

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

**4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code: \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**4b** (Code: \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**4c** (Code: \_\_\_\_\_) (Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

(Expenses \$ \_\_\_\_\_ including grants of \$ \_\_\_\_\_) (Revenue \$ \_\_\_\_\_)

**4e** Total program service expenses ► \$ \_\_\_\_\_

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A. ....		X
2 Is the organization required to complete Schedule B, Schedule of Contributors? ....	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. ....		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II. .... N/A		
5 <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III. .... N/A		
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. ....		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II. ....		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III. ....		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV. ....		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V. ....		X
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. ....		X
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. ....		
• 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. ....		
• 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. ....		
• 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. ....		
• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. ....		
• 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? If "Yes," complete Schedule D, Part X. ....		
12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII. ....		X
12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional. ....	Yes	No
12A		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. ....		X
14a Did the organization maintain an office, employees, or agents outside of the United States? ....		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I. ....		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II. ....		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III. ....		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. ....		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II. ....		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III. ....		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H. ....		X

**Part IV** Checklist of Required Schedules (continued)

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
<b>23</b> 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		X
<b>24a</b> 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 25		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? N/A		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? N/A		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? N/A		
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
<b>b</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		X
<b>26</b> 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		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
<b>33</b> 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		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
<b>37</b> 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		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		X

Note: All Form 990 filers are required to complete Schedule O

**Part V** Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	<b>1a</b> 0	
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<b>1b</b> 0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>	X
<b>2a</b>	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	<b>2a</b> 0	
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>N/A</b> <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	<b>2b</b>	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	<b>3a</b>	X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O <b>N/A</b>	<b>3b</b>	
<b>4a</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)?	<b>4a</b>	X
<b>b</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.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>	X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>	X
<b>c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? <b>N/A</b>	<b>5c</b>	
<b>6a</b>	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?	<b>6a</b>	X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? <b>N/A</b>	<b>6b</b>	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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?	<b>7a</b>	X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? <b>N/A</b>	<b>7b</b>	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>	X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>	
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>	X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>	X
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>	X
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	<b>7h</b>	X
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<b>8</b>	X
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966?	<b>9a</b>	X
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>	X
<b>10</b>	<b>Section 501(c)(7) organizations. Enter:</b>		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations. Enter:</b>		
<b>a</b>	Gross income from members or shareholders	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	X
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	

**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

**Section A. Governing Body and Management**

	Yes	No
<b>1a</b> Enter the number of voting members of the governing body.....	<b>1a</b>	
<b>b</b> Enter the number of voting members that are independent .....	<b>1b</b>	
<b>2</b> 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? .....	<b>2</b>	X
<b>3</b> 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? .....	<b>3</b>	X
<b>4</b> Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? .....	<b>4</b>	X
<b>5</b> Did the organization become aware during the year of a material diversion of the organization's assets? .....	<b>5</b>	X
<b>6</b> Does the organization have members or stockholders? .....	<b>6</b>	X
<b>7a</b> Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? .....	<b>7a</b>	X
<b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons? .....	<b>7b</b>	X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b> The governing body? .....	<b>8a</b>	X
<b>b</b> Each committee with authority to act on behalf of the governing body? .....	<b>8b</b>	X
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O .....	<b>9a</b>	X

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

	Yes	No
<b>10a</b> Does the organization have local chapters, branches, or affiliates? .....	<b>10a</b>	X
<b>b</b> If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? .....	<b>10b</b>	N/A
<b>11</b> Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? .....	<b>11</b>	X
<b>11a</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b> Does the organization have a written conflict of interest policy? If "No," go to line 13 .....	<b>12a</b>	X
<b>b</b> Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? .....	<b>12b</b>	N/A
<b>c</b> Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done .....	<b>12c</b>	N/A
<b>13</b> Does the organization have a written whistleblower policy? .....	<b>13</b>	X
<b>14</b> Does the organization have a written document retention and destruction policy? .....	<b>14</b>	X
<b>15</b> 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:		
<b>a</b> The organization's CEO, Executive Director, or top management official? .....	<b>15a</b>	X
<b>b</b> Other officers or key employees of the organization? .....	<b>15b</b>	X
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
<b>16a</b> 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>16a</b>	X
<b>b</b> If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? .....	<b>16b</b>	N/A

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed ► NONE

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
☐ Own website ☐ Another's website ☐ Upon request

**19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► See attachment #1







Part VIII Statement of Revenue				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
OTHER CONTRIBUTIONS SIMILAR AMOUNTS	1a Federated campaigns	1a					
	b Membership dues	1b	10,157				
	c Fundraising events	1c	24,709				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, & similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f		\$				
	h Total. Add lines 1a-1f			34,866			
PROGRAM SERVICE REVENUE	2a FAIR	Business Code		29,492	29,492		
	b FISH FRY			21,940	21,940		
	c MH DRIVE			3,843	3,843		
	d CHRISTMAS BASKETS			2,676	2,676		
	e FLAG FUND			176	176		
	f All other program service revenue #2			162	162		
	g Total. Add lines 2a-2f			58,289			
	3 Investment income (including dividends, interest, and other similar amounts)			14	14		
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
OTHER REVENUE	6a Gross Rents	(i) Real	16,725				
	b Less: rental expenses	(ii) Personal					
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities					
	b Less: cost or other basis and sales expenses	(ii) Other					
	c Gain or (loss)						
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events						
	9a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	a	154,348				
	b Less: cost of goods sold	b	72,293				
	c Net income or (loss) from sales of inventory			82,055	82,055		
	Miscellaneous Revenue			Business Code			
11a MISC			7,769	7,769			
b MACHINE INCOME			2,309	2,309			
c							
d All other revenue							
e Total. Add lines 11a-11d			10,078				
12 Total revenue. See instructions			185,302	150,436			

**Part IX** Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 .....	94			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 .....	12,390	12,390		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 .....				
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
7 Other salaries and wages .....	65,424		65,424	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .....				
9 Other employee benefits .....				
10 Payroll taxes .....	5,138		5,138	
11 Fees for services (non-employees):				
a Management .....				
b Legal .....				
c Accounting .....	3,405		3,405	
d Lobbying .....				
e Professional fundraising services. See Part IV, line 17 ..				
f Investment management fees .....				
g Other .....				
12 Advertising and promotion .....	2,305		2,305	
13 Office expenses .....	621		621	
14 Information technology .....				
15 Royalties .....				
16 Occupancy .....				
17 Travel .....				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .....				
19 Conferences, conventions, and meetings .....	151		151	
20 Interest .....	33		33	
21 Payments to affiliates .....	3,244		3,244	
22 Depreciation, depletion, and amortization .....	9,404		9,404	
23 Insurance .....	8,440		8,440	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <u>PROGRAM EXPENSES</u> .....	51,018		51,018	
b <u>UTILITIES</u> .....	20,536		20,536	
c <u>REPAIRS</u> .....	9,279		9,279	
d <u>SUPPLIES</u> .....	3,774		3,774	
e <u>LAUNDRY</u> .....	3,261		3,261	
f All other expenses ..... #3 ..	16,189		16,189	
25 <b>Total functional expenses.</b> Add lines 1 through 24f	214,706	12,390	202,222	
26 <b>Joint costs.</b> Check here <input type="checkbox"/> 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 .....				

**Part X** Balance Sheet

		(A) Beginning of year		(B) End of year
<b>A S S E T S</b>	1 Cash -- non-interest bearing .....	94,384	1	7,216
	2 Savings and temporary cash investments .....	46,855	2	37,847
	3 Pledges and grants receivable, net .....		3	
	4 Accounts receivable, net .....	435	4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L .....		6	
	7 Notes and loans receivable, net .....		7	
	8 Inventories for sale or use .....		8	
	9 Prepaid expenses and deferred charges .....		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D. ....	10a 309,060		
	b Less: accumulated depreciation .....	10b 147,902		
		164,692	10c	161,158
	11 Investments -- publicly traded securities .....		11	
	12 Investments -- other securities. See Part IV, line 11 .....		12	
	13 Investments -- program-related. See Part IV, line 11 .....		13	
	14 Intangible assets .....		14	
15 Other assets. See Part IV, line 11 .....		15		
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	306,366	16	206,221	
<b>L I A B I L I T I E S</b>	17 Accounts payable and accrued expenses .....	12,266	17	9,258
	18 Grants payable .....		18	
	19 Deferred revenue .....		19	
	20 Tax-exempt bond liabilities .....		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D. ....		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	23 Secured mortgages and notes payable to unrelated third parties .....		23	
	24 Unsecured notes and loans payable to unrelated third parties .....		24	
	25 Other liabilities. Complete Part X of Schedule D. ....		25	
	26 <b>Total liabilities.</b> Add lines 17 through 25 .....	12,266	26	9,258
<b>N E T A S S E T B A L A N C E S</b>	<b>Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets .....		27	
	28 Temporarily restricted net assets .....		28	
	29 Permanently restricted net assets .....		29	
	<b>Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 30 through 34.</b>			
	30 Capital stock or trust principal, or current funds .....		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund .....		31	
	32 Retained earnings, endowment, accumulated income, or other funds .....	294,100	32	196,963
	33 <b>Total net assets or fund balances</b> .....	294,100	33	196,963
	34 <b>Total liabilities and net assets/fund balances</b> .....	306,366	34	206,221

**Part XI** Financial Statements and Reporting

**1** . Accounting method used to prepare the Form 990: ☒ Cash ☐ Accrual ☐ Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

**2a** Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .

**b** Were the organization's financial statements audited by an independent accountant? . . . . .

**c** If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . . . N/A  
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

**d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: . . . . . N/A

☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

**3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .

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

	Yes	No
<b>2a</b>		X
<b>2b</b>		X
<b>2c</b>		X
<b>3a</b>		
<b>3b</b>		X

Attachment 3: Form 990 Page 10, Line 24 - Other Expenses

## Inspection

**For calendar year 2009 or tax period beginning**

**, and ending**

KNIGHTS OF COLUMBUS

37-0369090

MISC SUPPLIES	2,800	2,800
EQUIPMENT RENTAL	1,923	1,923
REAL ESTATE TAXES	1,852	1,852
TRASH	1,682	1,682
TELEPHONE	1,603	1,603
LICENSES	1,345	1,345
CABLE TV	926	926
EMPLOYEE BENEFIT	809	809
PEST CONTROL	770	770
DUES	607	607
EXTRA	588	588
UNEMPLOYMENT	504	504
BANK CHARGES	430	430
SUB CONTRACT LABOR	250	250
REFUNDS	100	100

Attachment 2: Form 990 Page 9, Line 2 - Program Service Revenue

<b>Name of Organization</b> KNIGHTS OF COLUMBUS	<b>Employer Identification Number</b> 37-0369090
--	---

<b>Program Service Revenue</b>	<b>business code</b>	<b>(a) Total revenue</b>	<b>(b) Related or exempt function revenue</b>	<b>(c) Unrelated business revenue</b>	<b>(d) Revenue excluded from tax under IRC 512, 513, or 514</b>
DISASTER FUND		162	162		
Totals		162	162		

BOOKS ARE IN CARE OF

Attachment 1: Form 990 Page 6, Part VI, Section C, Line 20

Open to Public Inspection	For calendar year 2009 or tax period beginning	, and ending
Name of Organization KNIGHTS OF COLUMBUS		Employer Identification Number 37-0369090
Part VI - Line 91a		

Individual Name ..... DICK LOGAN  
or  
Business Name:

Street Address ..... 902 THIRD ST

U.S. Address:

Zip code 62656 City Lincoln State IL  
or

Foreign Address

City .....

Province or State .....

Country .....

Postal code .....

Phone Number ..... (217) 732-2323

Fax Number .....



# **Depreciation and Amortization** (Including Information on Listed Property)

OMB No. 1545-0172

Department of the Treasury  
Internal Revenue Service (99)

▶ See separate instructions.

▶ Attach to your tax return.

**2009**Attachment  
Sequence No. 67

Name(s) shown on return

KNIGHTS OF COLUMBUS

Business or activity to which this form relates

FOR FORM 990

Identifying number

37-0369090

**Part I Election To Expense Certain Property Under Section 179**

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	\$250,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	\$800,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions	5	250,000
6	(a) Description of property	(b) Cost (busn. use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	250,000
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	9,115
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

**Section B -- Assets Placed in Service During 2009 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr. (business/investment use only -- see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property		5,780	15	HY	150 DB	289
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

**Section C -- Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations -- see instructions	22	9,404
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2009)

# 2009 Federal Depreciation Schedule

KNIGHTS OF COLUMBUS  
37-0369090

01-18-2010

Description	Date	Method	Year	Cost	Land/ Other	\$179	Spec Allow	Basis	Prior	Current
<b>Form 990</b>										
AIR CONDITION	05-11-04	200DBHY	7	2,221	0	0	1,736	485	104	43
ALARM SYS	12-01-97	200DBHY	10	1,528	0	0	0	1,528	1,984	0
APPLIANCE	01-05-00	200DBHY	7	1,899	0	0	0	1,899	1,899	0
BLACKTOP	09-21-05	150DBHY	15	2,802	0	0	0	2,802	862	194
BUILDING	01-31-97	S/LMM	39	188,329	0	0	0	188,329	57,389	4,829
BUILDING	04-19-97	S/LMM	39	9,590	0	0	0	9,590	1,968	246
CHAIRS	06-27-01	200DBHY	7	9,816	0	0	0	9,816	9,816	0
CHAIRS	05-31-01	200DBHY	7	3,500	0	0	0	3,500	3,500	0
COMPUTER	02-17-98	200DBHY	10	2,308	0	0	0	2,308	675	0
COPIER	04-04-07	200DBHY	5	300	0	0	0	300	156	58
DRIVEWAY	10-01-03	150DBHY	15	11,426	0	0	0	11,426	5,988	674
DRIVEWAY	07-01-02	150DBHY	15	3,004	0	0	1,422	1,582	192	93
DRIVEWAY	11-21-06	150DBHY	15	600	0	0	0	600	138	46
DRIVEWAY	09-21-05	150DBHY	15	2,802	0	0	0	2,802	862	194
DRIVEWAY	10-01-09	150DBHY	15	5,780	0	0	0	5,780	0	289
DRIVEWAY	07-11-00	200DBHY	10	13,500	0	0	0	13,500	12,173	884
EQUIPMENT	02-24-98	200DBHY	10	34	0	0	0	34	33	0
EQUIPMENT	08-14-01	200DBHY	7	1,096	0	0	0	1,096	1,096	0
EQUIPMENT	12-01-98	200DBHY	10	3,749	0	0	0	3,749	3,521	0
EQUIPMENT	02-17-98	200DBHY	10	500	0	0	0	500	497	0
EQUIPMENT	03-04-98	200DBHY	10	395	0	0	0	395	391	0
EQUIPMENT	02-01-02	200DBHY	5	370	0	0	349	21	1	0
EQUIPMENT	01-01-99	200DBHY	7	4,002	0	0	0	4,002	3,858	0
EQUIPMENT	11-19-04	200DBHY	7	824	0	0	644	180	38	16
FIXTURE	04-15-98	200DBHY	10	2,019	0	0	0	2,019	1,964	0
FIXTURES	03-27-98	200DBHY	10	449	0	0	0	449	444	0
FLOOR	11-13-06	S/LMM	39	1,944	0	0	0	1,944	106	50
GRILL	02-06-04	200DBHY	7	3,216	0	0	2,513	703	151	53
HEATING UNIT	04-19-05	200DBHY	7	2,558	0	0	0	2,558	1,758	228
HEATING UNIT	04-19-05	200DBHY	7	2,558	0	0	0	2,558	1,758	228
ICE MACHINE	07-14-04	200DBHY	7	3,259	0	0	2,547	712	153	64
ICE MACHINE	05-11-04	200DBHY	7	2,221	0	0	1,736	485	104	43
IMP BUILDING	01-01-99	200DBHY	5	10,611	0	0	0	10,611	10,571	0
OVEN	05-15-07	200DBHY	7	5,297	0	0	0	5,297	2,054	926
PLUT HEATING	06-04-07	S/LMM	39	2,629	0	0	0	2,629	104	67
POPCORN MACHINE	05-16-00	200DBHY	7	486	0	0	0	486	485	0
WATER HEATER	07-18-06	200DBHY	7	829	0	0	0	829	466	104
WATER SOFTNER	07-11-06	200DBHY	7	519	0	0	0	519	292	65
38 Assets			Totals:	308,970	0	0	10,947	298,023	127,551	9,404
38 Assets			Grand Totals:	308,970	0	0	10,947	298,023	127,551	9,404

\* Asset disposed this year  
~C Carryover basis in like-kind exchange transaction  
~B Excess basis in like-kind exchange transaction

## 2009 AMT Depreciation Schedule

KNIGHTS OF COLUMBUS  
37-0369090

01-18-2010

Description	Date	Method	Year	Basis	Prior	AMT	Regular	Adjust
<b>Form 990</b>								
AIR CONDITION	05-11-04	200DBHY	7	485	104	43	43	0
ALARM SYS	12-01-97	150DBHY	16	1,528	170	85	0	-85
APPLIANCE	01-05-00	150DBHY	7	1,899	116	0	0	0
BLACKTOP	09-21-05	150DBHY	15	2,802	456	194	194	0
BUILDING	01-31-97	S/LMM	40	188,329	9,416	4,708	4,829	121
BUILDING	04-19-97	S/LMM	40	9,590	480	240	246	6
CHAIRS	06-27-01	150DBHY	7	9,816	1,804	0	0	0
CHAIRS	05-31-01	150DBHY	7	3,500	644	0	0	0
COMPUTER	02-17-98	150DBHY	16	2,308	256	128	0	-128
COPIER	04-04-07	150DBHY	5	300	121	54	58	4
DRIVEWAY	10-01-03	150DBHY	15	11,426	1,504	674	674	0
DRIVEWAY	07-01-02	150DBHY	15	1,582	192	93	93	0
DRIVEWAY	11-21-06	150DBHY	15	600	108	46	46	0
DRIVEWAY	09-21-05	150DBHY	15	2,802	456	194	194	0
DRIVEWAY	10-01-09	150DBHY	15	5,780	0	289	289	0
DRIVEWAY	07-11-00	150DBHY	10	13,500	2,360	1,180	884	-296
EQUIPMENT	02-24-98	150DBHY	16	34	4	2	0	-2
EQUIPMENT	08-14-01	150DBHY	7	1,096	201	0	0	0
EQUIPMENT	12-01-98	150DBHY	16	3,749	416	208	0	-208
EQUIPMENT	02-17-98	150DBHY	16	500	56	28	0	-28
EQUIPMENT	03-04-98	150DBHY	16	395	44	22	0	-22
EQUIPMENT	02-01-02	200DBHY	5	21	1	0	0	0
EQUIPMENT	01-01-99	150DBHY	7	4,002	0	0	0	0
EQUIPMENT	11-19-04	200DBHY	7	180	38	16	16	0
FIXTURE	04-15-98	150DBHY	16	2,019	224	112	0	-112
FIXTURES	03-27-98	150DBHY	16	449	50	25	0	-25
FLOOR	11-13-06	S/LMM	39	1,944	100	50	50	0
GRILL	02-06-04	200DBHY	7	703	151	63	63	0
HEATING UNIT	04-19-05	150DBHY	7	2,558	697	313	228	-85
HEATING UNIT	04-19-05	150DBHY	7	2,558	697	313	228	-85
ICE MACHINE	07-14-04	200DBHY	7	712	153	64	64	0
ICE MACHINE	05-11-04	200DBHY	7	485	104	43	43	0
IMP BUILDING	01-01-99	150DBHY	5	10,611	0	0	0	0
OVEN	05-15-07	150DBHY	7	5,297	1,580	796	926	130
PLUT HEATING	06-04-07	S/LMM	39	2,629	104	67	67	0
POPCORN MACHINE	05-16-00	150DBHY	7	486	30	0	0	0
WATER HEATER	07-18-06	150DBHY	7	829	284	102	104	2
WATER SOFTNER	07-11-06	150DBHY	7	519	177	64	65	1
38 Assets		Totals:		298,023	23,298	10,216	9,404	-812
38 Assets		Grand Totals:		298,023	23,298	10,216	9,404	-812

\* Asset disposed this year

-C Carryover basis in like-kind exchange transaction

-B Excess basis in like-kind exchange transaction