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Form **990-EZ**Department of the Treasury  
Internal Revenue Service**Short Form  
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)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

OMB No 1545-1150

**2009****Open to Public  
Inspection****A For the 2009 calendar year, or tax year beginning****, 2009, and ending****, 20**

- B**
- Check if applicable:
- 
- ☐
- Address change
- 
- ☐
- Name change
- 
- ☐
- Initial return
- 
- ☐
- Terminated
- 
- ☐
- Amended return
- 
- ☐
- Application pending

Please use IRS label or print or type. See Specific Instructions.

**C Name of organization****KNIGHTS OF COLUMBUS COUNCIL 10483**

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite

**2610 N. LAKE RIDGE ST.**

City or town, state or country, and ZIP + 4

**WICHITA, KS 67205-1662****D Employer identification number****48 1092849****E Telephone number****316-729-9086****F Group Exemption**Number ▶ **188**• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).****G Accounting Method:** ☒ Cash ☐ Accrual  
Other (specify) ▶**I Website:** ▶**J Tax-exempt status** (check only one) -- ☒ 501(c) ( 8 ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**H Check** ▶ ☒ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)**K Check** ▶ ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally **not** more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.**L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ** ▶ \$ **81918****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received . . . . .	1	70501
	2	Program service revenue including government fees and contracts . . . . .	2	0
	3	Membership dues and assessments . . . . .	3	9726
	4	Investment income . . . . .	4	1691
	5a	Gross amount from sale of assets other than inventory . . . . .	5a	
		Less: cost or other basis and sales expenses . . . . .	5b	
		c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .	5c	0
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ▶ <input type="checkbox"/>		
	a	Gross revenue (not including \$ _____ of contributions reported on line 1) . . . . .	6a	
		Less: direct expenses other than fundraising expenses . . . . .	6b	
	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . . . .	6c	0	
7a	Gross sales of inventory, less returns and allowances . . . . .	7a		
	Less: cost of goods sold . . . . .	7b		
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	7c	0	
8	Other revenue (describe ▶ _____) . . . . .	8	0	
9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 . . . . .	9	81918	
Expenses	10	Grants and similar amounts paid (attach schedule) . . . . .	10	42805
	11	Benefits paid to or for members . . . . .	11	1666
	12	Salaries, other compensation, and employee benefits . . . . .	12	0
	13	Professional fees and other payments to independent contractors . . . . .	13	0
	14	Occupancy, rent, utilities, and maintenance . . . . .	14	0
	15	Printing, publications, postage, and shipping . . . . .	15	1179
	16	Other expenses (describe ▶ <b>SEE SUPPLEMENTAL SCHEDULES, LINE 16</b> ) . . . . .	16	24118
	17	<b>Total expenses.</b> Add lines 10 through 16 . . . . .	17	69768
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	18	12150
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . .	19	65616
	20	Other changes in net assets or fund balances (attach explanation) . . . . .	20	7245
	21	<b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20 . . . . .	21	85011

**Part II Balance Sheets.** If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments . . . . .	63392	22 85050
23 Land and buildings . . . . .	0	23 0
24 Other assets (describe ▶ <b>Dues Receivable, Furniture, Computer</b> ) . . . . .	2274	24 2052
25 <b>Total assets</b> . . . . .	65666	25 87102
26 <b>Total liabilities</b> (describe ▶ <b>Prepaid dues</b> ) . . . . .	50	26 2291
27 <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21) . . . . .	65616	27 85011

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

Cat No 10642I

Form **990-EZ** (2009)

SCANNED JUL 22 2010

## Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

**Part IV** **List of Officers, Directors, Trustees, and Key Employees.** List each one even if not compensated. (See the instructions for Part IV.)

Form **990-EZ** (2009)

**Part V Other Information** (Note the statement requirements in the instructions for Part V.)

	Yes	No
<b>33</b> Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . .	<b>33</b>	✓
<b>34</b> Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes . . . . .	<b>34</b>	✓
<b>35</b> If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
<b>a</b> Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? . . . . .	<b>35a</b>	✓
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>35b</b>	
<b>36</b> Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .	<b>36</b>	
<b>37a</b> Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ <b>37a</b>		
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	<b>37b</b>	✓
<b>38a</b> Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? . . . . .	<b>38a</b>	✓
<b>b</b> If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .	<b>38b</b>	
<b>39</b> Section 501(c)(7) organizations. Enter:		
<b>a</b> Initiation fees and capital contributions included on line 9 . . . . .	<b>39a</b>	
<b>b</b> Gross receipts, included on line 9, for public use of club facilities . . . . .	<b>39b</b>	
<b>40a</b> Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ <u>NA</u> ; section 4912 ▶ <u>NA</u> ; section 4955 ▶ <u>NA</u>		
<b>b</b> Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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 . . . . .	<b>40b</b>	
<b>c</b> Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶ <u>NA</u>		
<b>d</b> Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ <u>NA</u>		
<b>e</b> All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. . . . .	<b>40e</b>	✓
<b>41</b> List the states with which a copy of this return is filed. ▶		
<b>42a</b> The organization's books are in care of ▶ _____ Telephone no. ▶ _____ Located at ▶ _____ ZIP + 4 ▶ _____		
<b>b</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>42b</b>	✓
If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .		
<b>c</b> At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . . .	<b>42c</b>	✓
If "Yes," enter the name of the foreign country: ▶ _____		
<b>43</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>43</b>		
<b>44</b> Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>44</b>	✓
<b>45</b> Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>45</b>	✓

**Part VI**

**Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46–49b and complete the tables for lines 50 and 51.

- 46** 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 . . . . . **46** **Yes** **No**
- 47** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . . **47**
- 48** Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . . **48**
- 49a** Did the organization make any transfers to an exempt non-charitable related organization? . . . . . **49a**
- b** If "Yes," was the related organization a section 527 organization? . . . . . **49b**
- 50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

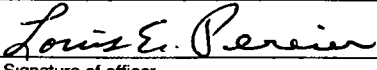
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

**f** Total number of other employees paid over \$100,000 . . . . . ▶

- 51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

**d** Total number of other independent contractors each receiving over \$100,000 . . . . . ▶

<b>Sign Here</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.			
	 Signature of officer		5/13/10 Date	
<b>Paid Preparer's Use Only</b>	Louis E. Perrier, Financial Secretary Type or print name and title		Preparer's identifying number (See instructions)	
	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	EIN
	Firm's name (or yours if self-employed), address, and ZIP + 4		Phone no	

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ▶ ☐ Yes ☐ No

**2009**

Entity as shown on Form 990EZ:

KNIGHTS OF COLUMBUS COUNCIL 10483

Employer ID Number:

48-1092849

**Attachment 4****OTHER CHANGES IN NET ASSETS****PART I, LINE 20**

TOTAL ASSETS REPORTED ON 2008 990EZ AT MARKET VALUE	65,616
ADJUST ASSET BASIS TO BOOK VALUE	
TOTAL ASSETS 12/31/08 VALUED AT BOOK VALUE (COST VALUE)	75,152
INCREASED TOTAL ASSETS, DEC. 31, 2008	9,536
DELETE PREPAID DUES LIABILITY	(2,291)
NET ASSET CHANGES	7,245

Note For '08 end of year assets were based on market value.

Entity as shown on Form 990EZ:  
KNIGHTS OF COLUMBUS COUNCIL 10483

Employer ID Number:  
48-1092849

**Attachment 1: SCHEDULE OF GRANTS AND ALLOCATIONS****PART I, LINE 10**

RECIPIENT OF GRANT / ALLOCATION	AMOUNT
CHURCH OF THE HOLY SPIRIT, GODDARD, KS	3,000
ST CATHERINES OF SIENNA CATHOLIC CHURCH	2,000
ST ELIZABETH ANN SETON CATHOLIC CHURCH	3,410
KANSAS STATE COUNCIL ASSESMENT	1,475
SUPREME COUNCIL ASSESMENT	1,034
SUPREME COUNCIL CULTURE OF LIFE FUND	847
SUPREME COUNCIL CATHOLIC ADVERTISING FUND	299
STATE COUNCIL DISASTER AID FUND FOR MEMBERS	376
KS STATE KNIGHTS OF COLUMBUS RELIGIOUS EDUCATION FUND	100
HOLY FAMILY CAMP - CHILDREN WITH DISABILITIES	491
STATE DRIVE FOR CHILDREN WITH MENTAL DISABILITIES	4,798
RELIGIOUS EDUCATION POSTER CONTEST	342
PRO-LIFE ORGANIZATIONS	3,961
SUPPORT FOR PARISH PRIESTS	3,274
SUPPORT FOR RED CROSS BLOOD DRIVE	326
SCHOLARSHIP AWARDS	650
BOY SCOUTS, GIRL SCOUTS AND OTHER YOUTH ACTIVITIES	1,950
SEMINARIAN SUPPORT & VOCATIONS DONATIONS	8,923
ALL OTHER	5,549
<b>TOTAL GRANTS AND ALLOCATIONS</b>	<b>42,805</b>

**Attachment 2: SCHEDULE OF BENEFITS PAID TO OR FOR MEMBERS PART I, LINE 11**

DESCRIPTION	AMOUNT
CHRISTMAS PARTY FOR MEMBERS CHILDREN	-
EASTER PARTY FOR MEMBERS CHILDREN	-
SOFT BALL TOURNAMENT ENTRY FEES	-
COUNCIL SOCIAL EVENTS	1,666
<b>TOTAL PAID TO OR FOR MEMBERS</b>	<b>1,666</b>

**Attachment 3 SCHEDULE OF OTHER EXPENSES****PART I, LINE 16**

DESCRIPTION	AMOUNT
FUND RAISING EVENTS:	
FIREWORKS TENT	3,161
GOLF TOURNAMENT	8,060
PANCAKE FEEDS	2,340
TEXAS HOLD-EM TOURNAMENTS	6,600
MENTALLY HANDICAPPED TOOTSIE ROLL EVENT	700
ALL OTHER FUND RAISING	1,567
ACCOUNTING FEES	561
SUPPLIES	456
CONFERENCES CONVENTIONS AND MEETINGS (STATE DELEGATES)	246
OTHER (DESCRIBE) - BANK CHARGES	-
MEMBER AWARDS	339
MISC OTHER	88
<b>TOTAL OTHER EXPENSES</b>	<b>24,118</b>