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SCANNED JUL 12 2010

Form

MONUMENTAL 05/06/2010 6 06 PM

Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047 2009

Open to Public

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<u>A_</u>	For the 20	09 calendar ye	ear, or tax yea			, and ending						
В	Check if applic		C Name of org	anization KNIC	SHTS TEMP	LAR OF UNI	red Sta	TES		D	Emplo	yer identification number
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											If "No,"	attach a list. (see instructions)
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Activities & Governance	3 Nun	nber of voting	members of	the governing be	ody (Part VI, lin	ne 1a)					3	5
Se	4 Nun	nber of indepe	endent voting	members of the	governing boo	ly (Part VI, line 1b)				4	3
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ğ	b Tota	al fundraising	expenses (Pa	art IX, column (C)), line 25) 🕨							
찣	17 Oth	er expenses ((Part IX, colur	mn (A), lines 11a	–11d, 11f–24f)			į		32,	028	50,563
	18 Tota	al expenses A	Add lines 13-	17 (must equal F	Part IX, column	(A), line 25)					414	71,926
	19 Rev	enue less exp	penses Subti	ract line 18 from	line 12					-8,	886	-159,625
5 8									Beginn	ing of Curren	Year	End of Year
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Net Assets or Fund Balances	21 Tota	al liabilities (Pa		J	-			Γ			112	122
žĒ	22 Net	assets or fund	d balances S	Subtract line 21 f	rom line 20	•				L, 655,	418	1,495,793
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He	re		re of officer								Date	
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		Preparer's		/ .	11 61-		1	Date		Check if		Preparer's identifying number (see instructions)
Pai		signature	7	hemes:	+ VI	1 druges	4	5-11-	10	self- employed	▶ 📗	P00282449
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Pa	art IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A .	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		<u> </u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
_	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		<u> </u>
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,"	ا ۽ ا		х
-	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,"		-	
0	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			<u> </u>
,	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D. Part IV	9		х
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	10		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	11	X	Ц
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	5 5	, , ,	
	Schedule D, Part VI	A STATE OF	,	
•	Did the organization report an amount for investments—other secunties in Part X, line 12 that is 5% or more	14.5		2
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	4 44		
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	12.5	,	-
	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 related 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.		1	
•	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	1	-)	
•	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.	į	٠.	
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			,
12	Schedule D, Parts XI, XII, and XIII	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	/		
-	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	,		١.
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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	14b		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	15_		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	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	4.7		x
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	_17	-	<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	18		x
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	-10		
19	If "Yes," complete Schedule G, Part III	19		х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
20_	Did the diganization operate one of more hospitals: it is a, complete obligation in		. 990	(2009)

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 X in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the X 22 United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated X 23 employees? If "Yes," complete Schedule J 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 X 24a 24b through 24d and complete Schedule K. If "No," go to line 25 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a pnor year, and that the transaction has not been reported on any of the organization's pnor Forms 990 or 25b 990-EZ? If "Yes," complete Schedule L, Part I 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or X disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? X If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions) X A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X 28b Schedule L. Part IV 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, X 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X 30 conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 31 X Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 32 X Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X 33 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, X III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 35 X Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 organization? If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, X Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and X 19? Note. All Form 990 filers are required to complete Schedule O

∂Ra	art V. Statements Regarding Other IRS Filings and Tax Compliance			г—
4-	Enterther with a surface of the Control of the Cont		Yes	No
1a		1	, '	
h	U.S. Information Returns. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1a 1 1b 0	⊣	1	
b D	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	7	Ι΄.	
·	gaming (gambling) winnings to prize winners?	1c		
2a			;	,
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3	ŀ	ر ، ا	
b		2b	x	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	ŀ		,
	this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	<u> </u>	<u> </u>
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, secunties account, or other financial	1.		٠,,
	account)?	4a		X
b			'	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank	1	1	
5a	and Financial Accounts 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		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	-		<u> </u>
-	Prohibited Tax Shelter Transaction?	5c	l	
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?	6a	ļ	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	ľ		
	gifts were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).		1	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	70		
.	and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		
b b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1.5		_
·	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	L	↓
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
_	required?	7h	-	 -
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		1	
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	4		
1	Section 501(c)(12) organizations. Enter:			
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)	-1		ļ
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	 	├─
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		, gan	(2009)
		FULL		(2003)

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.					
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body	1a	5	(14)	h	
b	Enter the number of voting members that are independent	1b	3	76 6 5 4 5 4 5 4 5 5 5 6 5 6 5 6 5 6 5 6	- Σ. 	<u>.</u>
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		•		45 p	, 9
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customanly performed by or under the direct		•			
	supervision of officers, directors or trustees, or key employees to a management company or other person?			3		х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed	,	• •	4		х
5	Did the organization become aware during the year of a material diversion of the organization's assets?			5		X
6	Does the organization have members or stockholders?			6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members					
	of the governing body?			7a		х
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		•	- 434	(3°,	
-	the year by the following:			1914 1 24 4	.,	
а	The governing body?			8a	X	·
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			<u> </u>		
-	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the International Control of the International	ernal				
	enue Code.)					
					Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	•		1,54		
~	affiliates, and branches to ensure their operations are consistent with those of the organization?			10b	:	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the		•	-122		
••	form?			11		х
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990			- ;	4.4	<u>'</u> ;
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	i i
u	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			<u> </u>		
	nse to conflicts?			12b	х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			123		
•	describe in Schedule O how this is done			12c	x	
13	Does the organization have a written whistleblower policy?	•		13		х
14	Does the organization have a written document retention and destruction policy?			14	х	
15	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?					
а	The organization's CEO, Executive Director, or top management official			15a	x	
ь	Other officers or key employees of the organization			15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			100		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			· `		
·va	with a taxable entity during the year?			16a		x
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate					
D	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			ان میں ان ا	,	
	the organization's exempt status with respect to such arrangements?			16b		
500	tion C. Disclosure	•		[100		
	List the states with which a copy of this Form 990 is required to be filed NONE					-
17 10	Soction 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990. T (501/c)(3)s only	۸.			•	

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

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public
- State the name, physical address, and telephone number of the person who possesses the books and records of the 20 7705 E. BALTIMORE STREET organization > DONALD MILLER

MD 21224

410-285-5670

Form 990 (2009)

BALTIMORE

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) Name and Title	(B) Average hours per			(chec		hat a		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
SEE STATEMENT #1		x	_	x				1,273	0	
			_							
										,
							-			

Part VII. Section A. Officers (A) Name and Title	(B) Average hours per			(chec				(D) Reportable compensation	(E) Reportable compensation	(F Estim amou	ated
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	oth comper from organi and re organia	er nsation the zation elated
						,					
					!						
1b Total	dudina but not lin	nited	to th	ose	listed	abo	▶ ove)	1,273 who received more than \$1	00,000 in		
reportable compensation from									·		Yes No
 Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line the organization and related or individual	complete Schedu 1a, is the sum of ganizations great a receive or accru	ile J f repo er th ue co	for s ortab an \$ mpe	uch i de co 150,0 ensat	indivion ompe 000?	dual ensat If "Y	ion a 'es," any i	and other compensation from complete Schedule J for su inrelated organization for		3	x x
Section B. Independent Contracto	ors										
Complete this table for your five compensation from the organization.	ation	nsate	d in	depe	nder	nt cor	ntrac				(C)
Name and	(A) business address						-	Descrip	(B) bon of services		(C) compensation
	-										
											
							<u> </u> 				·
							-				 .
2 Total number of independent c	ontractors (inclus	ling b	nd n	ot lin	nited	to th	050	listed above) who received			
more than \$100,000 in comper										For	m 990 (200

Fоп	n 990	(2009) KNI	GHTS TEM	iPL?	R OF	UNITE	STATES	52-0378259)	Page 9
Pa	art V	III Stater	nent of Reve	nue						
		The state of the s			 , * * * * * * * * * * * * * * * * * * *		(A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax
	15.1					S. (1)	1	function revenue	revenue	under sections 512, 513, or 514
र द	1a	Federated can	npaigns	1a			8			
퉏	Ь	Membership d	•	1b		5,678		1 30 12	* ·	
S,g	l c	Fundraising ev	•	1c						`
ar a	d	Related organ		1d					100	
S.E	e	Government grants		1e					4.	, ,
r Si	f	All other contribution	•	<u> </u>				10.52.5		
至	ľ	and similar amounts		1f]					• ,
Contributions, gifts, grants and other similar amounts	اما	Noncash contributio	ns included in lines 1a-		\$ \$			Telegraphy and the second		
ರ್ಜಿ	h	Total. Add line			•	•	5,678	The state of the state of		
						Busn. Code	2.75	1200	- 1,91	
eun	2a					Busin: Gode	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7,1,1		
Ş	Б					<u> </u>		-		
8	ءَ ا				•					
<u>S</u>										
S	٦				•			-		
<u>.</u>	,	All other progr	am service reven					<u> </u>		
Program Service Revenue	Ī	Total. Add line		uc		. •		y lake		
	3		ome (including d	widen	de interes			,		
	ľ	other similar a	· -	IVIGEIN	25, micres	st, and	38,475			38,475
	4		ivestment of tax-	evemr	t hand ar	oceeds ►	30,1.0			30,110
	5	Royalties .	resultent of tax	CACITIF	n bond pi	b			·	
	ľ	Noyalics .	(ı) Real		(n)	Personal	Carolina Carolina Carolina	S (ta)		
	6a	Gross Rents	(7.1.52)		()				71.7	
	ь	Less rental exps			····				5	
	c	Rental inc. or (loss)								
	d	Net rental inco				•	Like to the house of months and the	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		Gross amount from	(i) Secunties		T (u	Other	. YW. J. W. Y. J.	Contract of the	*)	
		sales of assets	210,		<u> </u>	, , , , , , , , , , , , , , , , , , , ,				
		other than inventory Less: cost or other	210,		 				do _	
		basis & sales exps	342,	651				Take the second	-	
	С	Gain or (loss)	-131,							
	d	Net gain or (loss)			<u> </u>	. •	-131,852	,		-131,852
		_	om fundraising even	te ·	·	. •	131,032			131,032
9	Ų.	(not including \$	in randraising even	ω						
10		-	eported on line 1c).	•			**************************************			
Other Revenue		See Part IV, line	•	а						
Ъ	h	Less direct ex	•	b						
ŏ	C		(loss) from fundr		events			i .		
			m gaming activities	- 1	events .					
	Ja	See Part IV, line		a				- S		
	h	Less direct ex	• •	b	-					
			(loss) from gamii	- (vities			* • • • • • • • • • • • • • • • • • • •		
		Gross sales of	_	ig acti	Villes		100 3			
	100	returns and alle		а			The state of the same of the state of the st	ا المشتكات المستحات الماليات الماليات الماليات الماليات الماليات الماليات الماليات الماليات الماليات الماليات الماليات الماليات ا		
	_	Less: cost of g	•	b						
		-		(onton					
	<u> </u>		(loss) from sales ellaneous Revenue	OI INV	eniory	Busn. Code				<u></u>
	44-	IVIISO	Cincilcodo IVEVEIIUO			Duan, Code	· ·	· ·		
	11a			•	•					
	b									
	C	All adhan : :			•					
	d	All other revent	=		-				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	9	Total. Add line		_	-	🔪	07.600			02 255
	12	rotal Revenue	See instruction	S			-87,699	0	0	-93,377

Form 990 (2009)

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).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
<u>7b</u> ,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and	19,644		,	
	organizations in the U.S. See Part IV, line 21	19,044		732	TE YOUR LEVEL AND IN
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22			a Children	经验证的
•	•			1 4 1 1 2 2 2	
3	Grants and other assistance to governments,			1 . 4.63/	
	organizations, and individuals outside the			्रिक्ट के किया है। इस की की की की	[4] 白鹭鹭等等等。
	U.S. See Part IV, lines 15 and 16		·····	- 11 JS 48	Her 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
4	Benefits paid to or for members			St. 1 - 1	7" - 1. 76 Day 27 . 7 -
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	1,597	_		
8	Pension plan contributions (include section 401(k)				<u> </u>
-	and section 403(b) employer contributions)]			
9	Other employee benefits				
10	Payroll taxes	122		<u> </u>	
	• •			 	
11	Fees for services (non-employees)				
a	Management	2,000		 	
b	• • • • • • • • • • • • • • • • • • • •	2,000		 	
c	Accounting			 	
d				7 30	·
e	Professional fundraising services See Part IV, line 17			<u> </u>	
f	Investment management fees			 	
g	Other			 	
12	Advertising and promotion .	051		 	
13	Office expenses .	851			<u> </u>
14	Information technology				
15	Royalties		·		
16	Occupancy	1,200	·= ,···		
17	Travel	500		ļ. <u>.</u>	
18	Payments of travel or entertainment expenses	İ			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest			,	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,772			
23	Insurance	500			
				1	195
24	Other expenses. Itemize expenses not				
	covered above (Expenses grouped together	But have fall			
	and labeled miscellaneous may not exceed	Strain 1			0 S 9
	5% of total expenses shown on line 25 below.)	24.5		<u> </u>	. 1
а	SEE STATEMENT #2	43,740			
b					
С					
d	• • • • • • • • • • • • • • • • • • • •				
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	71,926			
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	
244	fundraising solicitation			,	Farr 990 (2009)

	X Balance Sheet			(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing				1	
2	Savings and temporary cash investments		• •	98,059	2	7,069
3	Pledges and grants receivable, net				3	
4	Accounts receivable, net	•			4	
5	Receivables from current and former officers, directors, tr	ustees. k		表表表表现的人。 1	7.	3
	employees, and highest compensated employees Comp		•			2.30
	Schedule L				5	
6	Receivables from other disqualified persons (as defined u	ınder sed	tion .		Ľ ,	
	4958(f)(1)) and persons described in section 4958(c)(3)(E	3). Comp	lete		. ,	
_	Part II of Schedule L				6	
3 7	Notes and loans receivable, net	•			7	
7 8 1	Inventories for sale or use				8	
(9	Prepaid expenses and deferred charges				9	
10	Land, buildings, and equipment cost or				*	,
	other basis Complete Part VI of Schedule D	10a	14,18			ar '
l t	Less. accumulated depreciation	10b	9,75		10c	4,432
11	Investments—publicly traded securities			1,551,267	11	1,484,387
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	27
16	Total assets. Add lines 1 through 15 (must equal line 34)			1,655,530	16	1,495,915
17	Accounts payable and accrued expenses			112	17	122
18	Grants payable				18	
19	Deferred revenue				19	
20	Tax-exempt bond liabilities				20	
21 22 22	Escrow or custodial account liability Complete Part IV of		D	. 4 <u>. 4 . 4 . 4 . 4 . 4 . 4 . 4 . 4 . 4</u>	21	
22						4 000
g	employees, highest compensated employees, and disqua	lified		The state of the s	-	T. 1
_	persons Complete Part II of Schedule L				22	
23	Secured mortgages and notes payable to unrelated third				23	
24	Unsecured notes and loans payable to unrelated third par	ties .	,		24	
25	Other liabilities Complete Part X of Schedule D	•		112	25 26	122
26	Total liabilities. Add lines 17 through 25		· · · · · · · · · · · · · · · · · · ·	112	26	122
8	Organizations that follow SFAS 117, check here	and		4		
	complete lines 27 through 29, and lines 33 and 34.			, ,	27	
27	Unrestricted net assets				28	
28	Temporarily restricted net assets		••		29	
29	Permanently restricted net assets Organizations that do not follow SFAS 117, check her	e ▶ X	•	, ,		
-	and complete lines 30 through 34.	~ F [48	I			
5 30	Capital stock or trust principal, or current funds				30	
3 30	Paid-in or capital surplus, or land, building, or equipment	•		31		
27 28 29 30 31 32 33 34	Retained earnings, endowment, accumulated income, or		 ds	1,655,418	32	1,495,793
(32 (33	Total net assets or fund balances	-a		1,655,418	33	1,495,793
ייין ע	Total liabilities and net assets/fund balances			1,655,530	34	1,495,915

Form 990 (2009)

om	n 990 (2009) KNIGHTS TEMPLAR OF UNITED STATES 52-0378259		Pa	<u>ge 12</u>
Pa	art XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	ji	ر ، نُهْ	
	Schedule O.			. "
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2a		<u> </u>
b	and the state of t	2b		X
С	If "Yes" to line 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?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in	[1.1]		3.1
	Schedule O	12 4 7	-, 85°	
d	I If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	r E));	3 () 1.
	issued on a consolidated basis, separate basis, or both	F. 1	2,63	150
	Separate basis Consolidated basis Both consolidated and separate basis	12		
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?	3a		<u>X</u>
ь	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	3 Б	ļ	

Form **990** (2009)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Name	e of the organization		Employe	r identification number
K	NIGHTS TEMPLAR OF UNITED STATES			
_3	MONUMENTAL COM. OF COCKEYSVILLE			378259
Pa	Organizations Maintaining Donor Advised Funthe organization answered "Yes" to Form 990, F	ids or Other Similar Funds or Ad Part IV, line 6.	ccounts	s. Complete if
		(a) Donor advised funds	(b)	Funds and other accounts
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing that the	ne assets held in donor advised		
	funds are the organization's property, subject to the organization's exclus			Yes No
6	Did the organization inform all grantees, donors, and donor advisors in wi			
	used only for chantable purposes and not for the benefit of the donor or d	onor advisor, or for any other		
	purpose conferring impermissible private benefit?			Yes No
Pa	irt II. Conservation Easements. Complete if the orga		1990, P	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check al			
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically imp		l area
	Protection of natural habitat	Preservation of certified historic st	ructure	
_	Preservation of open space	A Ab - form of a		
2	Complete lines 2a through 2d if the organization held a qualified conservation easement on the last day of the tax year	ition continbution in the form of a conservat	lion	
	easement on the last day of the tax year			Held at the End of the Tax Year
_	Total number of conservation easements		2a	There at the Elie of the Tax Tear
a h	Total acreage restricted by conservation easements	••	2b	
D C	Number of conservation easements on a certified historic structure include	ed in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06		2d	h
3	Number of conservation easements modified, transferred, released, extin	• ••		
	the taxable year ▶	3		
4	Number of states where property subject to conservation easement is loc	ated >		
5	Does the organization have a written policy regarding the periodic monito			
•	violations, and enforcement of the conservation easements it holds?	3		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	g conservation easements during the year		
	>	-		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing cor	nservation easements during the year		
	▶ \$			
8	Does each conservation easement reported on line 2(d) above satisfy the	requirements of section		О О
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ıı)?			Yes No
9	In Part XIV, describe how the organization reports conservation easemen			
	balance sheet, and include, if applicable, the text of the footnote to the on	ganization's financial statements that descr	nbes	
	the organization's accounting for conservation easements. Int III Organizations Maintaining Collections of Art, I	Historical Transuras or Other S	imilar /	Accete
. 176	organizations Maintaining Collections of Art, In Complete if the organization answered "Yes" to		minimat F	193613.
	If the organization elected, as permitted under SFAS 116, not to report in		works of	
	art, historical treasures, or other similar assets held for public exhibition,			e,
	provide, in Part XIV, the text of the footnote to its financial statements tha			
b	If the organization elected, as permitted under SFAS 116, to report in its r	evenue statement and balance sheet work	s of art,	
	historical treasures, or other similar assets held for public exhibition, educ			
	provide the following amounts relating to these items			
	(i) Revenues included in Form 990, Part VIII, line 1		•	\$
	(ii) Assets included in Form 990, Part X		•	\$
2	If the organization received or held works of art, historical treasures, or ot	her similar assets for financial gain, provide	e the	
	following amounts required to be reported under SFAS 116 relating to the			
а	Revenues included in Form 990, Part VIII, line 1		•	s
b	Assets included in Form 990, Part X		. •	\$
				Cabadula D (Farm 000) 2000

Sche	dule D (Form 990) 2009 KNIGHTS TE				_			782 <u>59</u>			Page 2
Pa	rt III Organizations Maintaining (Collections	of Art	t, Histori	cal Treas	ures, c	or Other S	<u>Similar As</u>	ssets_(continu	ed)
3	Using the organization's acquisition, accession, collection items (check all that apply)	and other reco	ords, che	ck any of th	e following t	hat are a	a significant	use of its			
а	Public exhibition	d	Loa	n or exchar	nge program	s					
b	Scholarly research	e	Oth		3 . 3						
c	Preservation for future generations							. – <i>– -</i>			
4	Provide a description of the organization's collect	tions and exp	laın how	they further	the organiza	ation's e	xempt purpo	se in			
5	Part XIV During the year, did the organization solicit or re-	ceive donatior	ns of art,	historical tre	easures, or o	other sim	nılar				
Dá	assets to be sold to raise funds rather than to be rt IV Escrow and Custodial Arrar						nswered "	Yes" to F	orm 99	Ye ∩ Part	
	IV, line 9, or reported an amo	ount on Fo	m 990	, Part X,	line 21.			105 101			_
1a	Is the organization an agent, trustee, custodian of	or other interm	ediary fo	or contribution	ons or other	assets r	ot				С—
	included on Form 990, Part X?	•								∐ Ye	s No
b	If "Yes," explain the arrangement in Part XIV and	d complete the	followin	g table					τ		
									<u> </u>	Amount	<u> </u>
C	Beginning balance .							1 <u>c</u>	<u> </u>		
d	Additions during the year	-						. 1d			
е	Distributions during the year							. <u>1e</u>			
f	Ending balance										
2a	Did the organization include an amount on Form	990, Part X, I	ine 21?							Ye	s 🔛 No
	If "Yes," explain the arrangement in Part XIV										
<u>Pa</u>	rt V Endowment Funds. Comple	te if organi	zation	answere	d "Yes" to			1			
		(a) Curren	t year	(b) P	nor year	(c) Two	years back	(d) Three ye		(e) Four	years back
1a	Beginning of year balance							11:30-23	<u>در کیار در اور در /u>	37	
b	Contributions			<u> </u>		•	<u> </u>	a- Jane	a Martin	See - 22 - 400	a gray and and a man
С	Net investment earnings, gains,						, ,			one Ti	
	and losses						, , , , , , ,	2000 25 36	5.37、整	1 2 3 3	
d	Grants or scholarships							1. 4-15	2-13-34	<i>j.</i>	
е	Other expenditures for facilities						• •	, P		155° 35°	
	and programs			ļ			* >		14.55.54		
f	Administrative expenses						.	8. J. July 201	1. The carried	a u - (+7 a	
g	End of year balance			<u> </u>				6 3	1	4.7	7 7 7 7 7 7
2	Provide the estimated percentage of the year en	d balance hel	d as								
а	Board designated or quasi-endowment ▶	%									
b	Permanent endowment ▶ %										
С	Term endowment ▶ %										
3a	Are there endowment funds not in the possession	n of the organ	ization tl	hat are held	and adminis	stered fo	r the				
	organization by:										Yes No
	(i) unrelated organizations									3a(i)	
	(ii) related organizations								-	3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations lis	ted as require	d on Sch	edule R?						3Ь	
4	Describe in Part XIV the intended uses of the on	ganızation's ei	ndowmer	nt funds							
Pa	rt VI Investments-Land, Buildin	gs, and Ed	uipme	ent. See l	Form 990	, Part	X, line 10	•			
	Description of investment	(a) Cost or	other basi	s (b) Cost or oth	ner	(c) Ac	cumulated		(d) Book	value
		(invest	ment)		basis (other))	depi	eciation			
1a	Land										
	Buildings										
	Leasehold improvements										
	Equipment										
	Other				14	,187		9,75	5		4,432
	. Add lines 1a through 1e. (Column (d) must equa	al Form 990, F	art X, co	lumn (B), lir					•		4,432

Schedule-D (Form 990) 2009 KNIGHTS TEMPLAR OF U		52-03/8239	Page 3
Part VII Investments—Other Securities. See Form 99	90, Part X, line 12.		
(a) Description of security or category	(b) Book value	(c) Method of va	luation
(including name of security)		Cost or end-of-year n	narket value
Financial derivatives			
Closely-held equity interests			
Other	-		·
Oulei	•		······ · · · · · · · · · · · · · · · ·
	-		
			
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	_ !		
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	-		
T.4-1 (O-1 (b) (C) D-4 V (D) Inc. 42)		1900年1月26日 - 1911年1日	.1
	000 Ded V line 42	1994 - 1994 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	jih er e
Part VIII Investments—Program Related. See Form 9			
(a) Description of investment type	(b) Book value	(c) Method of va	
		Cost or end-of-year n	narket value
			··
	- 		
			-
	l		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Part IX Other Assets. See Form 990, Part X, line 15.		1	· · · · · · · · · · · · · · · · · · ·
(a) Description			(b) Book value
(4)			(-,
			
		<u> </u>	
Total (Column (h) must asual Form 000, Part V, cal. (P) line 15.)		>	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15)	35		
Part X Other Liabilities. See Form 990, Part X, line 2			.
1. (a) Description of liability	(b) Amount		
Federal income taxes		-	
			
			
		- 	
			
		⊣	
		_	
		1	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	<u>- </u>	7	
	ingligate Engraint statement	to that sanada the	
2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organ	nzation s ilnandai statemen	is mai reports the	
organization's liability for uncertain tax positions under FIN 48.			

Sche	tule D (Form 990) 2009 KNIGHTS TEMPLAR OF UNITED STA	res	52-037825	59	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audit	ed Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		·	3	
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities	•	•	5	
6	Investment expenses	• •		6	
7	Prior period adjustments		•	7	
8	Other (Describe in Part XIV)		•	8	
9	Total adjustments (net). Add lines 4 through 8			9	
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9			10	
	rt XII Reconciliation of Revenue per Audited Financial Statemen	nts W	ith Revenue per Re	turn	<u> </u>
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	•	•	100	4
- а	Net unrealized gains on investments	2a) 1 4 4 2 2 2 1 4	Ē r
b	Donated services and use of facilities	2b			
c	Recovenes of pnor year grants	2c			
d	Other (Describe in Part XIV)	2d		-	
	Add lines 2a through 2d		 -	2e	
3	Subtract line 2e from line 1		•	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1		1.	-
٠,	Investment expenses not included on Form 990, Part VIII, line 7b	4a		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	.
h	Other (Describe in Part XIV.)	4b		† (*)	
~	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	•		5	
	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents V	Vith Expenses per F	Retur	n
1	Total expenses and losses per audited financial statements		- inpostage part	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		• • •	7 2 1	
~	Donated services and use of facilities	2a	<u> </u>	2 3 3 4	
b	Prior year adjustments	2b	<u> </u>		
c	Other losses	2c		1 1	
d	Other (Departure in Dept VIV.)	2d			
e	Add lines 2a through 2d	<u></u>		2e	
3	Subtract line 2e from line 1		•• •	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1	ĺ		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			;
h	Other (Describe in Part XIV.)	4b		1 :	
	Add lines 4a and 4b	L.::-		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		•	5	
	rt XIV Supplemental Information				
	elete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines	1a and	d 4: Part IV. lines 1b		
	b; Part V, line 4; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines				
	art to provide any additional information		, , , , , , , , , , , , , , , , , , ,		
ıns p	art to provide any additional information				
	·				

Schedule D (Fo	orm 990) 2	2009	KN.	IGH'	rs '	TEM	PLAI	R O	F 1	UNI	TED	S:	[AT	EŞ		5	2-0)37	82	59						Page !	5
Schedule D (Fo	Suppl	emen	tal In	form	atio	n (co	ntinu	ed)																			_
						1 (5-5-																			-		_
		– –						- –	_	_		_			· –	_			- –	_	_	_	_		_		
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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22.

▶ Attach to Form 990.

KNIGHTS TEMPLAR OF UNITED STATES

|--|

X Schedule I (Form 990) 2009 **≗** □ Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed (h) Purpose of grant or assistance ×es X Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Employer identification number non-cash assistance (g) Description of 52-0378259 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (c) IRC (d) Amount of cash grant (e) Amount of non-cash (b) Method of valuation section if applicable assistance other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. : : 3 MONUMENTAL COM. OF COCKEYSVILLE For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA General Information on Grants and Assistance (p) EIN Enter total number of section 501(c)(3) and government organizations the selection criteria used to award the grants or assistance? (a) Name and address of organization Enter total number of other organizations or government Part Part

Part III

Page 2 (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) non-cash assistance (d) Amount of 52-0378259 Use Part IV and Schedule I-1 (Form 990) if additional space is needed (c) Amount of cash grant Schedule I (Form 990) 2009 KNIGHTS TEMPLAR OF UNITED STATES (b) Number of recipients (a) Type of grant or assistance Part IV

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

GRANTS MADE BY THE DONOR ARE MADE TO SECTION 501(C)(3) ORGANIZATIONS SO NO

OVERSIGHT OF SUCH GRANTS IS UNDERTAKEN BY THE DONOR.

Schedule I (Form 990) 2009

SCHEDULE O

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009

Department of the Treasury Internal Revenue Service

Name of the organization

KNIGHTS TEMPLAR OF UNITED STATES
3 MONUMENTAL COM. OF COCKEYSVILLE

Employer identification number 52-0378259

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE ORGANIZATION'S SECRETARY REVIEWS THE FORM 990 WITH THE TAX PREPARER
PRIOR TO THE SAME BEING FILED. ALL OFFICERS AND TRUSTEES REVIEW THE RETURN
AFTER THE SAME IS FILED.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
ALL OFFICERS AND TRUSTEES ARE REQUIRED TO SIGN AN ANNUAL STATEMENT
INDICATING THAT THEY HAVE READ THE CONFLICT OF INTEREST POLICY AND THAT
THEY AGREE TO COMPLY WITH SUCH POLICY.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

ALL MEMBERS OF THE ORGANIZATION VOTE ON THE PAY OF ALL OFFICERS, TRUSTEES,

OTHER EMPLOYEES, ETC. THE COMPENSATION OF ALL OFFICERS AND TRUSTEES IS

ALSO SET FORTH IN THE ORGANIZATION'S BY-LAWS.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

ALL MEMBERS OF THE ORGANIZATION VOTE ON THE PAY OF ALL OFFICERS, TRUSTEES,

OTHER EMPLOYEES, ETC. THE COMPENSATION OF ALL OFFICERS AND TRUSTEES IS

ALSO SET FORTH IN THE ORGANIZATION'S BY-LAWS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE FORM 990 IS AVAILABLE FOR PUBLIC INSPECTION. THE RETURN CAN BE
VIEWED AT THE LAW OFFICES OF FRIEDMAN & FRIEDMAN, LLP, 409 WASHINGTON
AVENUE, SUITE 900, TOWSON, MD 21204 BETWEEN THE HOURS OF 9:00 THROUGH 5:00
EASTERN TIME.

(99)

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

Identifying number

Department of the Treasury Internal Revenue Service

Name(s) shown on return

► See separate instructions. KNIGHTS TEMPLAR OF UNITED STATES

► Attach to your tax return.

Attachment Sequence No

	3 MONUM	MENTAL COM.	OF COCKE	XSVI	نظيليل.			52-	<u> </u>	8259
	ess or activity to which this form relates NDIRECT DEPRECIAT	CON	-							
	rt I Election To Expen		erty Linder Se	ction '	170					
,	Note: If you have a					com	olete Pa	rt I		
1	Maximum amount. See the instruct				Clore you	COIII	picto i u	1 (1.	1	250,000
2	Total cost of section 179 property p	=				•	• •		2	
3	Threshold cost of section 179 property	•	•	 stauction		•		•	3	800,000
4	Reduction in limitation Subtract line	=		diaction			•		4	300/000
5	Dollar limitation for tax year Subtract lin		•	 ried filina	senarately se	e instru	Hinns		5	
6	(a) Description		icas, citai - o - ii maii		(business use			Elected cost		
	(-)	,		(-/	<u>, </u>	,	<u>```</u>			, ',
										, ,, "
7	Listed property Enter the amount f	rom line 29	L			7	-			
8	Total elected cost of section 179 pr	•	ın column (c), lines	6 and 7	,	<u></u>	<u> </u>		8	
9	Tentative deduction Enter the sma	•	(0),		• •	•			9	
10	Carryover of disallowed deduction		008 Form 4562	••	• •	•	•		10	
11	Business income limitation. Enter the	-		han zer	o) or line 5 (s	ee ins	tructions)		11	
12	Section 179 expense deduction Ad		•						12	
13	Carryover of disallowed deduction	•			•	13				
	Do not use Part II or Part III below									
Pa	ர் !! Special Depreciat	on Allowance a	nd Other Depr	eciati	on (Do no	t incl	ude liste	d prope	rty.)	(See instr.)
14	Special depreciation allowance for									
	during the tax year (see instruction	s)							14	
15	Property subject to section 168(f)(1) election	•		•		•		15	
16	Other depreciation (including ACRS	S)			<u>.</u>	_			16	
. Pa	nt III MACRS Depreciat	ion (Do not inclu	ide listed prope	erty.) (See instru	ction	s.)			
			Secti	on A						
17	MACRS deductions for assets place	ed in service in tax ye	ears beginning before	re 2009			•		17	1,772
18	If you are electing to group any assets pl	aced in service during th	e tax year into one or	more ger	neral asset acco	ounts, c	heck here	· []	L	
	Section B—	Assets Placed in Se	rvice During 2009	Tax Ye	ar Using the	Gene	ral Depre	iation Sy	stem	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depre (business/investme only-see instruct	ent use	(d) Recovery period	(e) C	convention	(f) Met	bor	(g) Depreciation deduction
19a_	3-year property	_								
b	5-year property	<u>]</u>								
С	7-year property]	_							
_d	10-year property	<u> </u>						_		
е	15-year property	<u> </u>								
f	20-year property]				ļ				
g	25-year property				25 yrs			S/L		
h	Residential rental				27.5 yrs.	ļ	MM	S/L		
	property				27.5 yrs.	<u> </u>	MM	S/L		
i	Nonresidential real				39 yrs		MM	S/L		
	property	<u> </u>	<u> </u>		<u> </u>	<u> </u>	MM	S/L		<u>.</u>
	Section C—A	ssets Placed in Serv	ice During 2009 T	ax Yea	Using the A	Alterna	tive Depr	eciation S	ystem	
20 <u>a</u>	Class life]			ļ	<u> </u>		S/L		
b	12-year				12 yrs.			S/L		
С	40-year	<u> </u>	<u> </u>		40 yrs	<u></u>	MM	S/L		
Pa	rt IV Summary (See ins	tructions.)	· · · · · · · ·							
21	Listed property Enter amount from	line 28							21	
22	Total. Add amounts from line 12, li	nes 14 through 17, lin	es 19 and 20 in col	umn (g)	, and line 21	Enter	here		ł	
	and on the appropriate lines of you	r return Partnerships	and S corporations	see II	nstructions	, 			22	1,772
23	For assets shown above and place	d in service during the	e current year, ente	r the						
	portion of the basis attributable to s	ection 263A costs			•	23				L

KNIGHTS TEMPLAR OF UNITED STATES, #3 MONUMENTAL COMMANDERY OF COCKEYSVILLE 52-0378259 2009 FORM 990

PART VII - COMPENSATION OF OFFICERS, DIRECTORS, TRUSTEES

NAME / ADDRESS	AVG HRS PER WEEK	/ POS TRUSTEE	POSITION/ STEE OFFICER	COMPENSATION	COMPENSATION FROM RELATED ORGANIZATION	OTHER COMPENSATION
RICHARD H. WESTERMEYER 2007 MAGNOLIA WOODS COURT APTARTMENT #L EDGEWOOD, MD 21040	2.00	N/A	COMMANDER	NONE	NONE	NONE
LUTHER J. BELL 6519 CARROLL HIGHLAND ROAD ELDERSBURG, MD 21784	2.50	N/A	TREASURER	217.00	NONE	NONE
DONALD M. MILLER 7705 E. BALTIMORE STREET BALTIMORE, MD 21224	8.50	TRUSTEE	SECRETARY	1,056.00	NONE	NONE
JOSEPH J. PONZILLO, III 4 NORGATE COURT COCKEYSVILLE, MD 21030	1.00	TRUSTEE	₹ Z	NONE	NONE	NONE
ROBERT E. YOUNG 700 ANNESLIE ROAD BALTIMORE, MD 21212	0.50	TRUSTEE	N/A	NON	NONE	NONE
TOTAL				1,273.00		

KNIGHTS TEMPLAR OF UNITED STATES, #3 MONUMENTAL COMMANDERY OF COCKEYSVILLE 52-0378259 2009 FORM 990

PART IX, LINE 24 - OTHER EXPENSES

DESCRIPTION	AMOUNT
SUPPLIES	16,372.70
BANK FEES	40.00
SOCIAL & REFRESHMENTS	3,492.62
UNIFORMS	8,172.19
REPAIRS & MAINTENANCE	12,422.76
FOREIGN TAX PAID ON INVESTMENT INCOME	292.73
GRAND LODGE ASSESSMENT	2,736.90
GRAND LODGE ENDOWMENT FUND	210.00
TOTAL	43,739.90