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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

2009

Open to Public
Inspection

A For the 2009 calendar year, or tax year beginning

, and ending

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 Weirton Columbian Club

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

Room/suite

Cove Road & Knights Road

City, town, or country

State

ZIP + 4

Weirton

WV

26062

D Employer identification number

55-0459976

E Telephone number

(304) 723-1492

F Group Exemption

Number

► 0188

- 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
Other (specify) ► Cash Accrual

I Website: ► NA

J Tax-exempt status (check only one) — 501(c) (2) ◀ (insert no) 4947(a)(1) or 527H 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 ► \$ 48,772

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

1	Contributions, gifts, grants, and similar amounts received	1	26,120
2	Program service revenue including government fees and contracts	2	22,550
3	Membership dues and assessments	3	
4	Investment income	4	102
5a	Gross amount from sale of assets other than inventory	5a	0
b	Less cost or other basis and sales expenses	5b	0
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"/>	6a	0
a	Gross revenue (not including \$ 0 of contributions reported on line 1)	6b	0
b	Less direct expenses other than fundraising expenses	6c	0
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	7a	
7a	Gross sales of inventory, less returns and allowances	7b	
b	Less cost of goods sold	7c	0
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	8	0
8	Other revenue (describe ►)	9	48,772
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	10	0
10	Grants and similar amounts paid (attach schedule)	11	
11	Benefits paid to or for members	12	8,627
12	Salaries, other compensation, and employee benefits	13	570
13	Professional fees and other payments to independent contractors	14	38,815
14	Occupancy, rent, utilities, and maintenance	15	594
15	Printing, publications, postage, and shipping	16	23,905
16	Other expenses (describe ► See Attached Statement)	17	72,511
17	Total expenses. Add lines 10 through 16	18	-23,739
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	19	69,523
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)	20	0
20	Other changes in net assets or fund balances (attach explanation)	21	45,784
21	Net assets or fund balances at end of year Combine lines 18 through 20		

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

36	AUG 16 2010	(See the instructions for Part II)	(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	26,228	22	5,838
23	Land and buildings	70,512	23	63,425
24	Other assets (describe ►)	0	24	0
25	Total assets	96,740	25	69,263
26	Total liabilities (describe ► See Attached Statement)	27,217	26	23,479
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	69,523	27	45,784

Part III Statement of Program Service Accomplishments (See the instructions for Part III)

What is the organization's primary exempt purpose? Title Holding Company

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses

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

28 Holding of title to property, collection of income therefrom, and the remission of the net earnings to tax exempt organization Knights of Columbus Council #3734

(Grants \$ 0) If this amount includes foreign grants, check here

▶

72.511

29

(Grants \$) If this amount includes foreign grants, check here

1

0

30

(Grants \$) If this amount includes foreign grants, check here

1

0

31 Other program services (attach schedule)

(Grants \$ 0) If this amount includes foreign grants, check here

1

0

32

32 Total program service expenses. (add lines 28a through 31a) ► 32 72,511

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

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

- 33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity Yes No
33 X
- 34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes Yes No
34 X
- 35 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 Yes No
35 X
- a 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? Yes No
35a X
- b If "Yes," has it filed a tax return on **Form 990-T** for this year? Yes No
35b X
- 36 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 Yes No
36 X
- 37 a Enter amount of political expenditures, direct or indirect, as described in the instructions ► **37a** Yes No
37a 0
- b Did the organization file **Form 1120-POL** for this year? Yes No
37b X
- 38 a 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? Yes No
38a X
- b If "Yes," complete Schedule L, Part II and enter the total amount involved Yes No
38b 0
- 39 Section 501(c)(7) organizations Enter Yes No
39a X
- a Initiation fees and capital contributions included on line 9 Yes No
39b X
- 40 a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► _____, section 4912 ► _____, section 4955 ► _____ Yes No
40a X
- 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 Yes No
40b X
- c 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 Yes No
40c X
- d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization Yes No
40d X
- e 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 Yes No
40e X
- 41 List the states with which a copy of this return is filed ► _____
- 42 a The organization's books are in care of ► Ron Sekersky Telephone no ► (304) 723-1492
Located at ► Cove & Knights Road City Weirton ST. WV ZIP + 4 ► 26062
- b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ► _____ See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts**. Yes No
42b X
- c At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country ► _____ Yes No
42c X
- 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041**—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► **43** N/A Yes No
43 N/A
- 44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ Yes No
44 X
- 45 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 Yes No
45 X

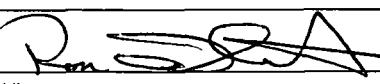
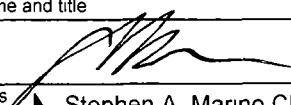
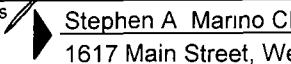
Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46–49b and complete the tables for lines 50 and 51

- 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 Yes No
46
- 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
- 49 a Did the organization make any transfers to an exempt non-charitable related organization?
b If "Yes," was the related organization a section 527 organization? 49a
b 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" 50

(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
Name None Str	Title			
City ST ZIP	Hr/WK 00	0	0	0
Name Str	Title			
City ST ZIP	Hr/WK 00	0	0	0
Name Str	Title			
City ST ZIP	Hr/WK 00	0	0	0
Name Str	Title			
City ST ZIP	Hr/WK 00	0	0	0
Name Str	Title			
City ST ZIP	Hr/WK 00	0	0	0
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" 51

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
Name None Str		
City ST ZIP		
Name Str		
City ST ZIP		
Name Str		
City ST ZIP		
Name Str		
City ST ZIP		
Name Str		
City ST ZIP		
d Total number of other independent contractors each receiving over \$100,000 . ►		

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
	Signature of officer 	Date 8/10/2010	
	Ron Sekersky	Secretary	
Type or print name and title			
Paid Preparer's Use Only	Preparer's signature 	Date 8/10/2010	Check if self-employed <input checked="" type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 	EIN ►	Preparer's identifying number (See instructions) (304) 737-3690
May the IRS discuss this return with the preparer shown above? See instructions ► <input type="checkbox"/> Yes <input type="checkbox"/> No			

Part I, Line 16 (990-EZ) - Other Expenses

23,905

1 Travel	1	
2 Meals and entertainment	2	
3 Fundraising	3	
4 Amortization	4	0
5 Conferences, conventions, and meetings	5	
6 Depreciation	6	7,087
7 Depletion	7	
8 Equipment rental and maintenance	8	822
9 Interest	9	815
10 Supplies	10	1,554
11 Telephone	11	1,776
12 Unrelated business income taxes	12	0
13 Bank Fees	13	138
14 Dues & Subscriptions	14	
15 Insurance	15	11,638
16 Licenses	16	75
17	17	
18	18	
19	19	
20	20	
21	21	
22	22	
23	23	
24	24	
25	25	
26	26	
27	27	
28	28	
29	29	

Part II, Line 26 (990-EZ) - Liabilities

	Description	Beginning	End
1	Payroll Withholding	353	0
2	Mortgage	26,864	23,479
3			
4			
5			
6			
7			
8			
9			
10			