



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form**
Return of Organization Exempt From Income TaxUnder 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 01/01, 2009, and ending 12/31, 20 09**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

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

P O Box 773

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

Humble, TX 77347-0773

D Employer identification number

74-1902324

E Telephone number

281-812-4050

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: ☒ Cash ☐ Accrual
Other (specify) ►**I** Website: ► www.kofc6878.org**J** Tax-exempt status (check only one) — ☒ 501(c) (3) ◀ (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 ► \$ 84,678**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	7,232
2	Program service revenue including government fees and contracts	2	0
3	Membership dues and assessments	3	6,889
4	Investment income	4	2,131
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 ☐		
a	Gross revenue (not including \$ 7,232 of contributions reported on line 1)	6a	68,426
b	Less: direct expenses other than fundraising expenses	6b	70,657
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	-2,231
7a	Gross sales of inventory, less returns and allowances	7a	0
b	Less: cost of goods sold	7b	0
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0
8	Other revenue (describe ►)	8	0
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	14,021
10	Grants and similar amounts paid (attach schedule)	10	0
11	Benefits paid to or for members	11	0
12	Salaries, other compensation, and employee benefits	12	626
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	35
16	Other expenses (describe ► See Statement 2)	16	15,965
17	Total expenses. Add lines 10 through 16	17	16,626
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-2,605
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	95,563
20	Other changes in net assets or fund balances (attach explanation)	20	0
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	92,958

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.)

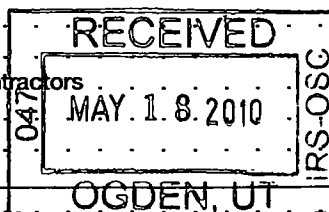
	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	95,563	22 92,958
23 Land and buildings	0	23 0
24 Other assets (describe ► See Statement 3)	0	24 0
25 Total assets	95,563	25 92,958
26 Total liabilities (describe ►)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	95,563	27 92,958

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

Cat. No. 106421

Form **990-EZ** (2009)

SCANNED JUL 07 2010 Revenue



26 P

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

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	✓
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	✓
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.		
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?	35a	✓
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
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	36	✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0	37a	
b Did the organization file Form 1120-POL for this year?	37b	✓
38a 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?	38a	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:		
section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0		
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	40b	✓
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 ▶ 0		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ 0		
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.	40e	✓
41 List the states with which a copy of this return is filed. ▶		
42a The organization's books are in care of ▶ <u>Cal Bertrand</u> Telephone no. ▶ <u>281-812-4050</u>		
Located at ▶ <u>P O Box 773, Humble, TX 77347</u> ZIP + 4 ▶ <u>77347</u>		
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)?	42b	✓
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 .		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	✓
If "Yes," enter the name of the foreign country: ▶		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ ☐	43	
and enter the amount of tax-exempt interest received or accrued during the tax year ▶		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	✓
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	45	✓

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.

	Yes	No
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	☒
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."

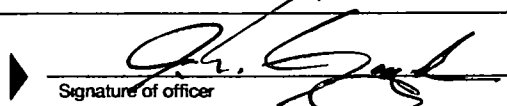
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

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
None		

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 5-12-2010	
Paid Preparer's Use Only	Jerry Glegerich, Treasurer Type or print name and title			
	Preparer's signature	Date	Check if self-employed ☐	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4		EIN	Phone no.

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

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1 Golf Tournament (event type)	(b) Event #2 Sunday Breakfast (event type)	(c) Other events 6 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	38,842	12,483	20,182	71,507
	2 Less: Charitable contributions	0	0	0	0
	3 Gross income (line 1 minus line 2)	38,842	12,483	20,182	71,507
Direct Expenses	4 Cash prizes	0	0	0	0
	5 Noncash prizes	0	0	0	0
	6 Rent/facility costs	0	0	0	0
	7 Food and beverages	0	0	0	0
	8 Entertainment	0	0	0	0
	9 Other direct expenses	8,992	7,154	12,779	28,925
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				(28,925)
	11 Net income summary. Combine line 3, column (d), and line 10 ▶				42,582

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				()
	8 Net gaming income summary. Combine line 1, column d, and line 7 ▶				

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities: _____		
a Is the organization licensed to operate gaming activities in each of these states?	9a	
b If "No," explain: _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b If "Yes," explain: _____		
11 Does the organization operate gaming activities with nonmembers?	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

Statement 2

Form: 990-EZ

Page: 1

Line Number: Part I Line 16

KNIGHTS OF COLUMBUS

74-1902324

Other Expenses Schedule

Description	Amount
chapter,state,supreme,capital,squires,ins,supplies	\$15,965
Total:	\$15,965

Statement 4

Form: 990-EZ

Page: 2

Line Number: Part IV

KNIGHTS OF COLUMBUS

74-1902324

Officers, Directors, Trustees and Key Employees Compensation

Name and address	Title and Hours	Compensation	Benefits	Expense
Grant Chapman PO Box 773 Humble, TX 77347	Grand Knight 25 00	\$0	\$0	\$0
Tom Andrews P O Box 773 Humble, TX 77347-0773	Asst Grand Knight 5.00	\$0	\$0	\$0
Jim McFadden P O Box 773 Humble, TX 77347-0773	Chancellor 5 00	\$0	\$0	\$0
Ken Powell P O Box 773 Humble, TX 77347-0773	Warden 5.00	\$0	\$0	\$0
Jerry Giegench P O Box 773 Humble, TX 77347-0773	FS 30 00	\$0	\$0	\$0
Cal Bertrand P O Box 773 Humble, TX 77347-0773	Treasurer 25 00	\$0	\$0	\$0
Doug Scherr P O Box 773 Humble, TX 77347-0773	Advocate 10 00	\$0	\$0	\$0
Bobby Goodrich P O Box 773 Humble, TX 77347-0773	Trustee 10 00	\$0	\$0	\$0
Phil Ardion P O Box 773 Humble, TX 77347-0773	Trustee 5.00	\$0	\$0	\$0
Curtis Roane P O Box 773 Humble, TX 77347-0773	Trustee 3 00	\$0	\$0	\$0
Greg Foresten P O Box 773 Humble, TX 77347-0773	Recorder 10 00	\$0	\$0	\$0
Total:		\$0	\$0	\$0

Fixed and Mailed Feb 3, 2010 Jerry

FOR PERIOD ENDED DECEMBER 31, 2009

Due By: FEBRUARY

COUNCIL NO. 6878 CITY Humble

STATE TEXAS

SCHEDULE A - MEMBERSHIP

ADDITIONS	INS.	ASSO.	TOT.	DEDUCTIONS	INS.	ASSO.	TOT.
Initial Members Start of Period	177	254	431	Suspensions	-	-	-
Initiations	-	7	7	Deaths	-	-	-
Transfers from other councils	3	-	3	Final Withdrawals	-	-	-
Transfers—Assoc. to Ins.	5	-	5	Transfers—Assoc. to Insurance	-	9	9
Transfers—Ins. to Assoc.	-	8	8	Transfers—Ins. to Associate	5	-	5
Reinstatements & Readmissions	185	270	455	Transfers to Other Councils	3	1	4
Total for Period	185	270	455	Total Deductions	8	10	18
Minus Total Deductions	8	10	18				
Number Members End of Period	177	260	437				

(For this form only, exclude inactive insurance members)

SCHEDULE B - CASH TRANSACTIONS

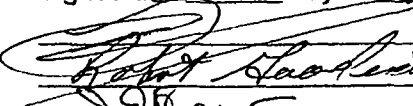
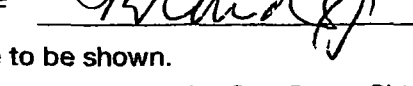
FINANCIAL SECRETARY			TREASURER		
Cash on Hand Beginning of Period	\$	-	Cash on Hand Begin. Period	\$	15,904.54
Cash Received—Dues, Initiations	\$	2.00	Received from Fin. Sec.	\$	57,052.72
Cash Received from other Sources:			Interest Earned on Investments	\$	1,501.94
(Explain Kind and Amount)			Total Receipts	\$	74,459.20
<u>GOLF TOURNEY \$ 38,642-</u>			Disbursements		
<u>Breakfast \$ 5,650.88</u>			Per Capita: Supreme Council	\$	681.28
<u>Other Events \$ 12,554.84</u>			State Council	\$	3242.00
Total Cash Received	\$	56,852.72	General Council Expenses	\$	48,580.81
Paid to Treasurer	\$	57,052.72	Transfers to Sav. & Invest. Accts.	\$	-
Cash on Hand at End of Period	\$	-	Miscellaneous	\$	-
			Total Disbursements	\$	52,504.09
			Net Balance on Hand	\$	2,1955.11

SCHEDULE C - ASSETS AND LIABILITIES

ASSETS			LIABILITIES		
Cash:			Due Supreme Council:		
Undeposited Funds	\$	-	Per Capita	\$	-
Bank — General — Acct.	\$	21,955.11	Supplies	\$	-
— Special Acct.	\$	2,648.10	Catholic Adv.	\$	-
— Savings & Investment Acct.	\$	62,844.34	Other	\$	-
Due From <u>17</u> Members	\$	510.00	Due State Council	\$	-
Total Current Assets	\$	92,957.55	Advance Payments By <u>0</u> Members	\$	-
Less: Current Liabilities	\$	-	Misc. Liabilities	\$	-
Net Current Assets	\$	92,957.55			
Investments:					
*Real Estate	\$	-			
*Furniture	\$	-			
*Stocks & Bonds	\$	-			
Total Investment Assets	\$	-			
Less: Investment Liabilities	\$	-			
Net Investment Assets	\$	-			
Total Assets	\$	92,957.55			

Use reverse side to describe.

Please complete all items. Insert "None" where no figures are to be shown.

Signed this 15th day of Feb 20 10
 Grand Knight
 Trustee
 Trustee



**KNIGHTS
OF COLUMBUS**
IN SERVICE TO ONE. IN SERVICE TO ALL.

SEMIANNUAL COUNCIL AUDIT REPORT

FOR PERIOD ENDED JUNE 30, 2009

COUNCIL NO. 6878 CITY Humble STATE TX Due By: AUGUST 1

SCHEDULE A - MEMBERSHIP

ADDITIONS	INS.	ASSO.	TOT.	DEDUCTIONS	INS.	ASSO.	TOT.
Total Members Start of Period	175	248	423	Suspensions			
Initiations	—	17	17	Deaths			
Transfers from other councils	1	1	2	Final Withdrawals			
Transfers—Assoc. to Ins. <i>INCL. 3-Insct</i>	7		7	Transfers—Assoc. to Insurance			
Transfers—Ins. to Assoc.		3	3	Transfers—Ins. to Associate			
Reinstatements & Readmissions	—	—	—	Transfers to Other Councils			
Total for Period	183	269	452	Total Deductions			
Minus Total Deductions	6	15	21				
Number Members End of Period	177	254	431				

(For this form only, exclude inactive insurance members)

SCHEDULE B - CASH TRANSACTIONS

FINANCIAL SECRETARY			TREASURER		
Cash on Hand Beginning of Period	\$	—	Cash on Hand Begin. Period	\$	24,742.82
Cash Received—Dues, Initiations	\$	6649.25	Received from Fin. Sec.	\$	25,640.60
Cash Received from other Sources:			Interest Earned on Investments	\$	1,224.46
(Explain Kind and Amount)			Total Receipts	\$	51,607.88
<i>Fish Fry</i> \$ 4102.50			Disbursements		
<i>Breakfasts</i> \$ 6832.50			Per Capita: Supreme Council	\$	713.50
<i>Other</i> \$ 8027.35	\$		State Council	\$	—
Total Cash Received	\$	18,961.35	General Council Expenses	\$	34,989.89
Paid to Treasurer	\$	25,640.60	Transfers to Sav. & Invest. Accts.	\$	—
Cash on Hand at End of Period	\$	—	Miscellaneous	\$	—
			Total Disbursements	\$	35,703.30
			Net Balance on Hand	\$	15,904.58

SCHEDULE C - ASSETS AND LIABILITIES

ASSETS			LIABILITIES		
Cash:			Due Supreme Council:		
Undeposited Funds	\$	—	Per Capita	\$	—
Bank — General — Acct.	\$	15,904.54	Supplies	\$	—
— Special Acct.	\$	2,646.56	Catholic Adv.	\$	—
— Savings & Investment Acct.	\$	66,938.88	Other	\$	—
Due From <u>42</u> Members	\$	1,300.00	Due State Council	\$	—
Total Current Assets	\$	86,789.98	Advance Payments By <u>222</u> Members	\$	3340.00
Less: Current Liabilities	\$	3,340.00	Misc. Liabilities	\$	—
Net Current Assets	\$	83,449.98		\$	—
Investments:				\$	—
*Real Estate	\$	—		\$	—
*Furniture	\$	—		\$	—
*Stocks & Bonds	\$	—	Total Current Liabilities	\$	3340.00
Total Investment	\$	—	Signed this <u>27</u> day of <u>JULY</u> 20 <u>09</u>		
Less: Investment			<i>Robert H. Hankins</i> Grand Knight		
Liabilities	\$	—	<i>Douglas Schen</i> Trustee		
Net Investment Assets	\$	—	<i>Patricia Beltrami</i> Trustee		
Total Assets	\$	83,449.98			

*Use reverse side to describe

5/9/2010

Budget

1/1/2009 through 12/31/2009 Using 2008 - 2009 Fraternal Year

Page 1

Category Description	1/1/2009 Actual	Budget	12/31/2009 Difference
INCOME			
REVENUE - EVENTS			
BBQ Chicken Dinner 1	1,939.50	1,800.00	139.50
BBQ Chicken Dinner 2	0.00	1,800.00	-1,800.00
Clergy Night	0.00	750.00	-750.00
Family Night #1	210.41	675.00	-464.59
Family Night #2	362.00	250.00	112.00
Family Night #3	600.00	250.00	350.00
Family Night #4	0.00	250.00	-250.00
Fish Fry	4,102.00	4,000.00	102.00
Golf Tournament	38,842.00	32,000.00	6,842.00
Ladies Night	0.00	500.00	-500.00
Raffle	0.00	1,500.00	-1,500.00
Street Corner 1	3,925.50	2,500.00	1,425.50
Street Corner 2	3,306.00	2,500.00	806.00
Sunday Breakfast	12,482.88	10,000.00	2,482.88
Turkey Fry	1,035.00	850.00	185.00
xMiscellaneous Revenue Events	4,701.84	2,000.00	2,701.84
Other REVENUE - EVENTS	0.00	0.00	0.00
TOTAL REVENUE - EVENTS	71,507.13	61,625.00	9,882.13
REVENUE- OTHER			
Advertising (Capers)	0.00	0.00	0.00
Council Social	270.00	100.00	170.00
Dues	6,889.25	7,500.00	-610.75
Initiations - Member Reimb	482.50	300.00	182.50
Interest Earned	2,131.46	2,000.00	131.46
Interfaith Charities	0.00	750.00	-750.00
KC Shirts and Hats	483.00	500.00	-17.00
Lecture's Fund	696.00	600.00	96.00
RSVP-Vocations	400.00	400.00	0.00
xMiscellaneous Revenue	1,818.44	1,325.00	493.44
Other REVENUE- OTHER	0.00	0.00	0.00
TOTAL REVENUE- OTHER	13,170.65	13,475.00	-304.35
TOTAL INCOME	84,677.78	75,100.00	9,577.78
EXPENSES			
CAPITAL EXPENSE			
Kitchen Equipment	293.00	500.00	207.00
Signs, Banners, Etc	145.22	200.00	54.78
xOther	0.00	250.00	250.00
Other CAPITAL EXPENSE	0.00	0.00	0.00
TOTAL CAPITAL EXPENSE	438.22	950.00	511.78
COUNCIL EXPENSES			
Building & Equip Maint	0.00	60.00	60.00
Building Fund	690.00	690.00	0.00
Council Social	1,260.12	500.00	-760.12
Fin Secretary Expense	625.90	600.00	-25.90
Grand Knight Expense	0.00	300.00	300.00
Initiations	250.00	300.00	50.00
Insurance	678.00	1,000.00	322.00

Budget

1/1/2009 through 12/31/2009 Using 2008 - 2009 Fraternal Year

5/9/2010

Page 2

Category Description	1/1/2009 Actual	- Budget	12/31/2009 Difference
KC Shirts and Hats	382.00	500.00	118.00
Lecture's Fund	1,320.62	1,000.00	-320.62
P O Box Rental	56 00	60.00	4.00
Postage General	34.83	900.00	865.17
Sam's Club Membership	140 00	140.00	0.00
Supplies	709.38	500.00	-209.38
xMiscellaneous Council Expense	921.20	500.00	-421.20
Other COUNCIL EXPENSES	0.00	0.00	0.00
TOTAL COUNCIL EXPENSES	7,068.05	7,050.00	-18.05
DONATIONS			
Bereavement (\$50 Cap)	80 25	500 00	419 75
Birthright	300 00	300.00	0.00
Cardinal Denardo Red Hat Fund	1,000.00	1,000.00	0.00
Christmas Baskets	400.00	400.00	0.00
Ecuador Mission	2,100 00	1,000.00	-1,100.00
Ecuador Mission Computer Lab	0 00	0.00	0.00
Fall Festival	500.00	1,000 00	500 00
Grotto Memorial	0 00	1,250.00	1,250 00
Interfaith Chanties	0.00	1,500 00	1,500 00
Parish Clergy Christmas Gifts	500.00	500 00	0.00
Prison Ministry	0.00	0.00	0.00
Prist Annuity	1,000.00	1,000.00	0.00
RSVP-Vocations	2,750.00	2,000.00	-750.00
Scholarship	1,000 00	1,000.00	0.00
St Mary Magadline Gold Card	6,000.00	6,000 00	0.00
St Mary School Tuition	5,000.00	5,000.00	0.00
State Charities	4,280.00	4,100.00	-180.00
Youth Activities	0.00	250 00	250.00
zMiscellaneous Donations	11,796.75	3,000.00	-8,796.75
Other DONATIONS	0.00	0.00	0.00
TOTAL DONATIONS	36,707 00	29,800.00	-6,907.00
EVENTS EXPENSE			
BBQ Chicken Dinner 1	307 84	800.00	492.16
BBQ Chicken Dinner 2	0.00	800 00	800.00
Christmas Parade	110.30	50.00	-60.30
Family Night #1	755.05	500.00	-255.05
Family Night #2	388.21	450.00	61.79
Family Night #3	533.38	450.00	-83.38
Family Night #4	0 00	450.00	450.00
Fish Fry	2,422 57	2,500.00	77.43
Golf Tournament	8,991.60	7,500.00	-1,491 60
Ladies Night	0.00	500 00	500 00
Picnic	0 00	400 00	400 00
Raffle	0.00	1,200 00	1,200 00
Street Corner 1	20.00	75.00	55.00
Street Corner 2	56.64	75.00	18 36
Sunday Breakfast	7,154.04	8,500.00	1,345.96
Turkey Fry	166.97	350.00	183.03
xMiscellaneous Events	8,017.92	3,000.00	-5,017.92
Other EVENTS EXPENSE	0.00	0.00	0.00
TOTAL EVENTS EXPENSE	28,924.52	27,600.00	-1,324.52

Budget

1/1/2009 through 12/31/2009 Using 2008 - 2009 Fraternal Year

5/9/2010

Page 3

Category Description	1/1/2009 Actual	- Budget	12/31/2009 Difference
K of C GALV-HOUST CHAPTER			
Chapter Dinner Exp	312.50	0.00	-312.50
Chapter Support - Convention	100.00	50 00	-50.00
Clergy Night	0.00	1,000.00	1,000.00
Clergy Night Silent Auction	0 00	100.00	100.00
Clergy Night Table Sponsorship	0 00	100.00	100 00
Per Capita	214 00	150.00	-64.00
Other K of C GALV-HOUST CHAPTER	0.00	0.00	0.00
TOTAL K of C GALV-HOUST CHAPTER	626.50	1,400.00	773.50
K of C STATE			
Convention Advertising	225.00	250.00	25.00
DD Expense	200.00	250.00	50 00
Per Capita	3,242 00	3,050.00	-192.00
State Convention Expense	984 82	750.00	-234 82
Other K of C STATE	0.00	0 00	0.00
TOTAL K of C STATE	4,651.82	4,300 00	-351.82
K of C SUPREME			
Advertising	623.00	400.00	-223.00
Per Capita	1,394 78	1,100.00	-294 78
Supplies	526 34	500.00	-26.34
Other K of C SUPREME	0 00	0.00	0.00
TOTAL K of C SUPREME	2,544 12	2,000.00	-544.12
SQUIRES			
Squire Mid Yr Conv	0.00	500.00	500.00
Squire's State Convention	700.00	500 00	-200.00
xSquire's Miscellaneous Expense	1,015.06	1,000.00	-15.06
Other SQUIRES	0.00	0 00	0.00
TOTAL SQUIRES	1,715 06	2,000.00	284.94
TOTAL EXPENSES	82,675.29	75,100.00	-7,575.29
OVERALL TOTAL	2,002.49	0.00	2,002.49

St. Mary Magdalene Catholic Church
527 S. Houston Ave.
Humble, TX 77338
281-446-8211



Grant Chapman and the Holy Smokers
Attn: Community Partner
3743 Palmetto Creek Dr.
Kingwood, TX 77339

Dear Community Partner

On behalf of the St. Mary Magdalene parish family, I would like to thank you for your donation. We simply could not have accomplished the success we enjoyed at our Family Fall Festival without generous support from friends like you. I hope you were able to join us last month and share in the food, fun and fellowship under the beautiful clear skies. It appeared to me that everyone who attended had a blessed day at our annual event.

By law this letter must also declare that we have not provided you with any goods or services in exchange for your contribution. Please keep this letter as part of your records; it serves as an important document should you decide to itemize this contribution for federal income tax deduction.

May God bless you for your help as we continue our exciting journey of faith through this third millennium of Christian discipleship.

Sincerely in Christ,

Fr. Mike

Rev. Michael J. Carmody
Pastor

St. Mary Magdalene Catholic Church
527 S. Houston Ave.
Humble, TX 77338
281-446-8211



Knights of Columbus Council 6878
Attn: Community Partner
527 South Houston
Humble, TX 77338

Dear Community Partner

On behalf of the St. Mary Magdalene parish family, I would like to thank you for your donation. We simply could not have accomplished the success we enjoyed at our Family Fall Festival without generous support from friends like you. I hope you were able to join us last month and share in the food, fun and fellowship under the beautiful clear skies. It appeared to me that everyone who attended had a blessed day at our annual event.

By law this letter must also declare that we have not provided you with any goods or services in exchange for your contribution. Please keep this letter as part of your records; it serves as an important document should you decide to itemize this contribution for federal income tax deduction.

May God bless you for your help as we continue our exciting journey of faith through this third millennium of Christian discipleship.

Sincerely in Christ,

Fr. Mike

Rev. Michael J. Carmody
Pastor



Dear Friends,

Just look at the face of four-year-old Isabella from Oaxaca, Mexico! She is full of wonder and potential as she receives her new red wheelchair. Her excited parents no longer have to carry her everywhere they go, and Isabella no longer has to crawl on the bare ground. Better yet, she can now go to pre-school and socialize with other children . . . it seems that the prayers of the whole family have been answered by donors like you!

Over the years, I have personally encountered many children like Isabella. Throughout the world there are millions of individuals who were born with physical disabilities, became amputee victims of landmine tragedy, were paralyzed in car accidents or are elderly and just too frail to move on their own. They all deeply appreciate your help.

Why not make your holiday shopping simple, quick and meaningful by sponsoring a wheelchair in the name of a loved one! You can give the gifts of hope, mobility, freedom, dignity and independence to another human being. You can change the life of a child, teen or adult in need of a wheelchair, as well as the lives of every member of their family, with a gift to the Wheelchair Foundation.

Donations of any amount make a big difference. For each \$150 donation, we will send you a beautiful presentation folder containing a customized certificate **from you to that special person in your life**, and a photo of a wheelchair recipient. Giving mobility in the name of a loved one will be received with heartfelt thanks and remembered and appreciated long after the holiday season. And in the process, **you will be making dreams come true!** Good people like you have helped us send almost 800,000 wheelchairs to deserving recipients around the world.

Please make your donations by December 1st to allow sufficient time for us to prepare and mail your customized presentation folder. Call us directly, donate online, or donate by mail with the enclosed envelope. A donation of \$16,500 will sponsor the delivery of an entire container of 110 wheelchairs, sent to the destination of your choice, bringing hope to those in desperate need of mobility. Each wheelchair in a full container shipment can be embroidered with your customized logo or message.

Thank you for sharing in the holiday spirit by helping us answer the prayers of physically disabled people worldwide who dream of mobility.

Happy Holidays,

David E. Behring
President

Please visit our website at www.wheelchairfoundation.org to view our presentation folder, watch our videos, or for more information.

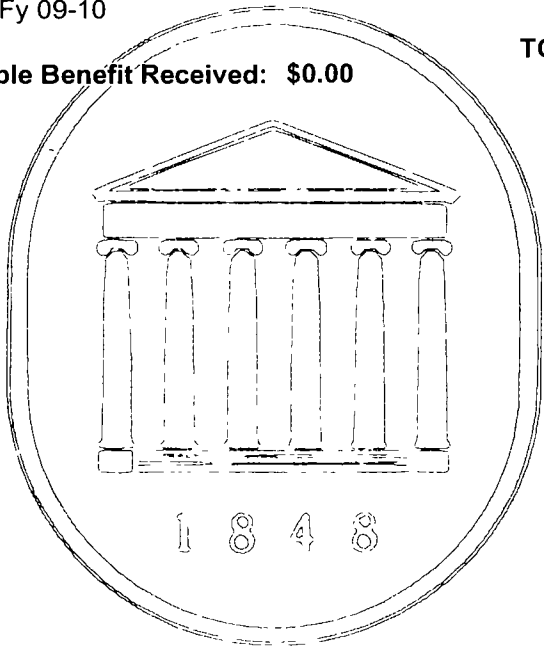
3820 Blackhawk Road • Danville, California 94506 USA • Toll Free (877) 378-3839
Wheelchair Foundation, A Division of Global Health and Education Foundation
Federal Tax ID #94-3353881

THE UNIVERSITY OF MISSISSIPPI
OFFICE OF DEVELOPMENT SERVICES
P.O. Box 249, University, MS 38677
(662) 915-5944

Knights of Columbus # 6878
P O. Box 773
Humble, TX 77347

217080

STATEMENT FOR CALENDAR YEAR 2009

DATE	ACCOUNT DESCRIPTION	CHARITABLE CONTRIBUTION	CONTRIBUTION AMOUNT
12/31/2009	Misc S'Ships Fy 09-10	\$500 00	\$500 00
	Total Tangible Benefit Received: \$0.00	\$500.00	\$500.00
			

It is with sincere appreciation that I send you this summary of your total contributions during the last calendar year. I trust this statement will make your tax preparation easier.

The University of Mississippi Foundation is a qualified tax exempt Corporation under Section 501(c)(3) of the Internal Revenue Code and, therefore, your contributions are tax deductible. If you received any item of value for your contributions, the fair market of these items has been subtracted from your contributions in calculating your tax deductible amount. In addition, for those of you who may have made contributions which qualified you for the right to purchase athletic tickets, Section 170(L) of the Internal Revenue Code of 1986 allows a charitable deduction of eighty percent (80%) of that gift. The amount shown as your charitable contribution reflects these required reductions. Please consult your own tax advisor for determining your proper charitable deduction.

All of us at the University thank you for your continuing generosity and support.

Sincerely,



Ron Guest
Director of Development Services

St. Mary Magdalene Catholic Church

527 South Houston Ave.

Humble, TX 77338

281-446-8211

Fax: 281-446-8213

March 3, 2010

K.C. Council #6878
Po Box 773
Humble, TX. 77347-0773

Dear K.C. Council #6878,

On behalf of the St. Mary Magdalene parish family, I would like to thank you personally for your \$6,400.00 annual support. We simply could not accomplish our aims and mission without the generous financial participation of friends like you.

By law this letter must also declare that we have not provided you with any goods or services in exchange for your contribution. Please keep this letter as part of your records; it serves as an important document should you decide to itemize this contribution for federal income tax deduction purposes.

May God bless you for your help as we continue our exciting journey of faith through this third millennium of Christian discipleship.

Sincerely in Christ,

A handwritten signature in black ink, appearing to read "McCarthy" with a stylized flourish underneath.

Rev. Michael J. Carmody
Pastor

(For your convenience, a more detailed breakdown of your contributions, in accord with IRS regulations, begins on the following page.)

St. Mary Magdalene Catholic Church
for K.C. Council #6878
Reporting period: 1/1/2009 to 12/31/2009

03/03/2010
Contribution Statement
Page 1

Our records show that you have made the following tax deductible contributions:

<u>Date</u>	<u>Description</u>	<u>Deductible Amount</u>	<u>Check</u>
12/20/2009	Social Services(St-Mm)	\$400.00	
12/21/2009	Christmas	\$6,000.00	
		<u>\$6,400.00</u>	

P.S. St. Mary Magdalene Catholic Church has not provided, in whole or in part, any goods or services to the above named donor in exchange for this gift.

This statement is provided by St. Mary Magdalene Catholic Church in order to comply with the Internal Revenue Code. Retain this and your cancelled checks with your tax records.