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Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

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

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

A For the 2009 calendar year, or tax year beginning		January 1	, 2009, and ending	December 31	, 20 09
B	C	D			
<input type="checkbox"/> Check if applicable	Name of organization	Employer identification number			
<input type="checkbox"/> Address change	Knights of Columbus Council 10293	90 0369721			
<input type="checkbox"/> Name change	Number and street (or P O box, if mail is not delivered to street address)	Room/suite	E Telephone number		
<input checked="" type="checkbox"/> Initial return	223 Wind Haven Ln		337-288-7954		
<input type="checkbox"/> Terminated	City or town, state or country, and ZIP + 4	F Group Exemption Number ►			
<input type="checkbox"/> Amended return	Lafayette, LA 70506	0188			
<input type="checkbox"/> Application pending	G Accounting Method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ►				

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

I Website: ► http://www.knights.org

J Tax-exempt status (check only one) — 501(c) (8) (insert no) 4947(a)(1) or 527

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

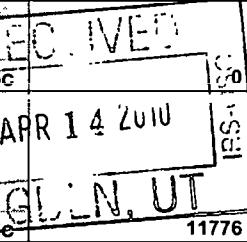
L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ 48254

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

	Revenue	6a	6b	6c	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21
1	Contributions, gifts, grants, and similar amounts received	9271		31233	0			11776	28797	3804	0	0	0	0	1288	20484	25576	3221	19099	0	22320
2	Program service revenue including government fees and contracts				0																
3	Membership dues and assessments				0																
4	Investment income				0																
5a	Gross amount from sale of assets other than inventory	5a			0																
b	Less: cost or other basis and sales expenses	5b	0		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 ►)	6a	19457		0																
a	Gross revenue (not including \$ 9271 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	0		0																
7a	Gross sales of inventory, less returns and allowances	7b	0		0																
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 ► RSVP Seminarian Support Matching Funds from Supreme.)	9			400																
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8																				
10	Grants and similar amounts paid (attach schedule)	10																			
11	Benefits paid to or for members	11																			
12	Salaries, other compensation, and employee benefits	12																			
13	Professional fees and other payments to independent contractors	13																			
14	Occupancy, rent, utilities, and maintenance	14																			
15	Printing, publications, postage, and shipping	15																			
16	Other expenses (describe ► Convention, Meeting, council social, work around Church.)	16																			
17	Total expenses. Add lines 10 through 16	17																			
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18																			
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																			
20	Other changes in net assets or fund balances (attach explanation)	20																			
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21																			

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.

	(A) Beginning of year	(B) End of year	
22	Cash, savings, and investments	19099 22	22320
23	Land and buildings	0 23	0
24	Other assets (describe ►)	0 24	0
25	Total assets.	19099 25	22320
26	Total liabilities (describe ►)	0 26	0
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	19099 27	22320



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

What is the organization's primary exempt purpose? **Charity**

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.

28 St Edmond Blood Drive, Over 140 donations received.

Support of St Edmond Church Youth Activities.

Fund and deliver 100 food baskets to the poor at Christmas time.

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

Expenses

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

29 Pro-Life Walk

Collect donations for Allemen Center(Mentally Handicapped Program)

Support the KOC YEP, "Youth Expansion Program".

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

Ba

30 Awards Banquet - We honor the Teacher of the year, Fire Fighter of the year, Police Officer of the year, Hero, Parishoner of the year, Altar servier of the year, and CYLA winner honored.

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

1

31 Other program services (attach schedule)
(Grants \$ _____) If this amount includes foreign grants, check here ►

Total program service expenses (add lines 28a through 31a)

10

32 Total program service expenses (add lines 28a through 31a) ►

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See [Part IV](#))

2

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

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Richard Yandle	Grand Knight 4 hours	0	0	0
152 Inez Ln, Lafayette, LA 70506				
Derwin Savoy	Deputy Grand Knight 3 hrs	0	0	0
300 Spruse, Apt 102, Lafayette, LA 70506				
Raymond Patout	Financial Secretary 5 hrs	0	0	0
223 Wind Haven Ln, Lafayette, LA 70506				
Kim Broussard	Treasurer 2 hours	0	0	0
505 Marie Antoinette, Lafayette, LA 70506				

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.	35a	✓
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?	35b	
b If "Yes," has it filed a tax return on Form 990-T for this year?	36	
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	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:	39a	N/A
a Initiation fees and capital contributions included on line 9	39b	N/A
b Gross receipts, included on line 9, for public use of club facilities		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► _____, section 4912 ► _____, section 4955 ► _____	40b	
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		
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 ► _____		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ► _____		
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>Raymond P Patout</u> Telephone no. ► <u>337-288-7954</u> Located at ► <u>223 Wind Haven Ln., Lafayette, LA</u> ZIP + 4 ► <u>70506</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.? If "Yes," enter the name of the foreign country: ► _____	42c	✓
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 ► <u>43</u> □		
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	✓

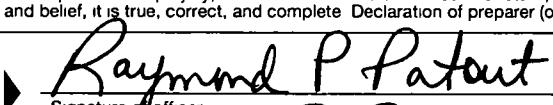
Part VI

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.

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	
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b	If "Yes," was the related organization a section 527 organization?	49b	
50	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."		
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation
			(d) Contributions to employee benefit plans & deferred compensation
			(e) Expense account and other allowances
f	Total number of other employees paid over \$100,000	►	

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

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
d Total number of other independent contractors each receiving over \$100,000	►	

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 RAYMOND P. PATOUT, Financial Secretary Type or print name and title			
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	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