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SCANNED JUL 2 8 2010

Form; **990**

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)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

<u>A</u>	For th	e 2009 ca	alendar	year, or tax year beginning Warch 1		and ending		ary 28	, 20 10	
В	Check if a	applicable	Please	C Name of organization Knights Templar of	the United S	tates Carol	ina	D Employ	er identification n	
	Address	change	use IRS label or	Doing Business As	<u> </u>	_ .		57	017120	2
	Name cl	_	print or	Number and street (or P.O. box if mail is not delivered to	street address)	Room/suite	•	E Telepho	ne number	
	Initial ref		type See	PO Box 7463				(803)	799-915	9
_	Termina		Specific Instruc-	City or town, state or country, and ZIP + 4						
_	Amende		tions	Columbia, SC 29202-7463				G Gross red	ceipts \$	
=		on pending	F Nan	ne and address of principal officer:		0	H(a) la thia	a aroun ratum	for affiliates? Yes	Ø No
ш	Application	n penung		• •					ncluded? Yes	□No
$\overline{}$	Tay-eye	empt status	s: [7] s	501(c) ()◀ (insert no.)	527				iciuded? Laves list (see instruction	
÷	Websi		2. A.	301(c) () ((insert 110.)	021		7	exemption num		
<u>K</u>		organization	Com	oration ☐ Trust ☐ Association ☑ Other ▶	I Va	ar of formation			legal domicile SC	
				oration in this in Association is other in	Tr 16	as or ionnation	1307	W State of	legal domicile 30	
F	art I	Summ								
	1 1	Briefly d	escribe	the organization's mission or most signif	ficant activitie	es:				
ø		we sup	port a r	number of charitable organizations. Ea	cn one has a	primary g	oai.			-
auc										
Activities & Governance										
ě	2	Check this	s box ►	if the organization discontinued its operations or	r disposed of mo	ore than 25% o	of its net asse	ets.		
⊕ ⊕	3	Number	of votir	ng members of the governing body (Part	VI, line 1a).			. 3		<u> 4582</u>
es	4	Number	of inde	pendent voting members of the government	g body (Part	VI, line 1b)		. 4		<u> 4582</u>
<u> </u>	5			f employees (Part V, line 2a)				. 5		3
Act	6							6		
_				elated business revenue from Part VIII, co				7a		
	l b	Net unre	lated b	usiness taxable income from Form 90-7	Hime/24D			. 7b		
					CIALD		Prior Ye	ar	Current Yea	ī
	8	Contribu	itione ai	B738.70	664	41.90				
Revenue	9			nd grants (Part VIII, line 1 pg. JUN 2. e revenue (Part VIII, line 2g)	8 2hin 1)SO: 				
Σ	40	-		ome (Part VIII, column (A), lines 3, 4, and	11	نا``ارخ	1:	3021.24	97	84.04
æ	10	Other re	vonue (Part VIII, column (A), lines 5, 60,86 9	100 and 110					
	11 12	Total rev	onue (add lines 8 through 11 (must equal Part Vill,	edumin (A)	ne 12)	R	1759.94	762	25.94
_	+					19 12)		350.00		50.00
	1			ılar amounts paid (Part IX, column (A), lın		· · ·	··· ·	330.00		30.00
ø,	14		-	o or for members (Part IX, column (A), line		· . · . ·		0884.77	200	83.69
Expenses	15			ompensation, employee benefits (Part IX, co				U004.77	200	03.09
e e	16a			idraising fees (Part IX, column (A), line 11e)						
û			_	g expenses (Part IX, column (D), line 25) 🕨						70.04
				s (Part IX, column (A), lines 11a-11d, 11f-		⊢		0705.51		59.81
	18	Total exp	penses.	. Add lines 13-17 (must equal Part IX, co	lumn (A), line	25) 🗀	8	1940.28		93.50
_		Revenue	less ex	penses. Subtract line 18 from line 12				180.34		67.56
s or	<u>မို့</u>					Be	eginning of Co		End of Yea	
Assets	20	Total ass	sets (Pa	art X, line 16)				0036.59		95.35
t As	21	Total lial	bilities (Part X, line 26)			8	1967.18	832	03.05
Şet	21 22	Net asse	ets or fu	und balances. Subtract line 21 from line 2	<u> 20</u>		46	8069.41	4610	92.30
Р	art II	Sign	ature	Block						
		Under po	enalties o	f perjury, I declare that I have examined this return, in	cluding accomp	anying schedul	es and stater	nents, and to	the best of my kn	owledge
		and belie	et, it is th	ue, correct, and complete Declaration of preparer (of	tner than officer)	is based on a	ii intormation	or which pre	eparer has any kno	wieage
Si	gn	1 \ \a	Mw	nie J. V. X Dryse,			1 4	0/23	12010	
	ere	Sigr	nature of	officer C	. 1	\overline{C}) Dat	8/-	1	
		KV	5/M	NIET THORRIS GA	RAND	PORP	Tarv	/Kec	nRleR	
	(1	e or print	name and title	W. 77 4 CF	4. C/ 1	7/	/ 	-// \SI/ } .	
_					Date	Che		Preparer's ic	dentifying number	
_		Preparer signature				self-	loyed ▶ 🏻	(see instruct		
Pa			,			l eurb	,			
	eparer's	Firm's n	ame (or y	ours k			EIN	> :		
Us	e Only	ıf self-en	nployed),				-+-			
R. Ø.	ou the		, and ZIP		lega instructi	ione)	Phone n	U. P \	· Yes [
_				s return with the preparer shown above?			<u> </u>	<u> </u>		No No
Fο	r Priva	cy Act ar	nd Pape	rwork Reduction Act Notice, see the separa	ate instruction	1S.	Cat No 11	282Y	Form 99 (J (2009)

Page 2
)
☐ Yes 🗹 No
☐ Yes ☑ No
y expenses. t of grants and
)
)

Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$

) (Revenue \$

Total program service expenses ▶

5990.58

Par	t 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		1
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		4
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		1
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		4
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," complete Schedule D, Part I	6		1
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		4
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		4
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		4
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		√_
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11		4
9	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more 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 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.			
⊕	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 the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12		4
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		4
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		4
b	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		4
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		4
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		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		4
<u>20</u>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	L	4

Pai	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 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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 employees? If "Yes," complete Schedule J	23		1
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 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
c	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 defense any tax exempt bonds?	24b 24c		✓ ✓
	to defease any tax-exempt bonds?	24d		√
b	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a 25b		√
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 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? If "Yes," complete Schedule L, Part III.	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	-		
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	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, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		1
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.			1

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
b	Statements, filed for the calendar year ending with or within the year covered by this return 4 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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, securities account, or other financial account)?	4a		1
b	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.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		4
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		4
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
	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		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	70		1
_	and services provided to the payor?	7a 7b		A
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.0		
	required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year	7c		4_
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
-	benefit contract?	7e		4
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		4
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g		
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			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
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		L
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
	are so an entire train manufactor of strain end end end end end end end end end en			
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	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			

Part VI 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.

<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		<u>√</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct	.	-	
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5_		✓
6	Does the organization have members or stockholders?	6	✓	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	.	1	ı
	of the governing body?	7a	✓	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	✓	
	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			l
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		✓_
Sec	tion B. Policies (This Section B requests information about policies not required by the Inter-	ernal		
Rev	enue Code.)			
			Yes	No_
10a	Does the organization have local chapters, branches, or affiliates?	10a	✓	
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			İ
_	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			
	form?	11		✓
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			L
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		L
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		<u></u>
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
C	describe in Schedule O how this is done	12c		<u></u>
13	Does the organization have a written whistleblower policy?	13		✓
14	Does the organization have a written document retention and destruction policy?	14		<u> </u>
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?			ĺ
а	The organization's CEO, Executive Director, or top management official	15a		
	Other officers or key employees of the organization	15b		<u> </u>
_	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			[
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	1		l
_	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b	<u>. </u>	<u> </u>
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ South Carolina			-
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			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of int	erest	
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and reco	ords o	f the	
	organization: ▶ Johnnie T. Morris, Grand Secretary-Recorder, 1518 Hampton St., Columbia, SC 29201-2	925		

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.

☐ Check this box if the organization did not co	mpensate	any o	cum	ent	offi	cer, d	lirec	tor, or trustee.		
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee Or director	Institutional trustee	Officer	k Key employee	Highest compensated employee	Former Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Johnnie T. Morris 110 Holborn Ct., Columbia, SC 29210				1				9100.00	0	1502.00 (TvI)
Howard T. Burgess 114 Susie Rd., Belton, SC 29627	·			4				1350.00	0	67.00 (TvI)
Maywood Fowler 669 Wright Rd., Tabor City, NC 28463				1				o	0	2900.00 (TvI)
								,		
									·	

Part VII	Section A. Officers, Directors, Tru	stees, Key	/ Emp	loye	ees,	an	d Hig	hes	Compensated	Employees (c	ontinue	d)	
	(A) Name and title			on (c	•	C) call t	that ap	nh/l	(D) Reportable	(E) Reportable		(F) stimated	
			Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	com f org	mount of other oth	n n n
		<u> </u>											
1b Total .				<u>. </u>	<u> </u>	·		<u> </u>	10450.00		0	4469	.00
	nber of individuals (including but i e compensation from the organiza		to th	ose	list	ed a	above	e) w	ho received mi	ore than \$100,	000 in		
Teportabl	e compensation from the organiza											Yes	No
	organization list any former office												
	e on line 1a? If "Yes," complete S ndividual listed on line 1a, is the s								d other compe		3		<u> </u>
the organ	nization and related organizations	greater tha	an \$1	50,0	0003	? If '	"Yes,"	co.	mplete Schedu	le J for such	4		
5 Did any	person listed on line 1a receive rendered to the organization? If "	or accrue Yes," com	com plete	pen Sch	satı edu	on ile J	from J for s	any such	unrelated org	anization for	5		✓
	ndependent Contractors												
	e this table for your five highest of ation from the organization.	ompensate	ed ind	lepe	ende	ent (contra	acto	rs that receive	d more than \$	100,00	0 of	
	(A) Name and business add	dress							(B) Description of s	services		C) ensation	
												_	
					•			\dagger	<u>.</u>	-			
	mber of independent contractors (i					d to	those	list	ed above) who	received			

Part	VII	Statement of Revenue				T
		Statement of Nevenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns	6 64 41.90			
		Business Code				
Program Service Revenue	2a b c d e f	All other program service revenue . Total. Add lines 2a–2f				
	3 4 5	Investment income (including dividends, interest, and other similar amounts)	9784.04			
	6a b c	Gross Rents Less: rental expenses Rental income or (loss) Net rental income or (loss)				
	7a	Gross amount from sales of assets other than inventory (i) Securities (ii) Other				
		Less: cost or other basis and sales expenses . Gain or (loss) . Net gain or (loss)				
Other Revenue	b	Gross income from fundraising events (not including \$				
		Gross income from gaming activities. See Part IV, line 19				
		Less: direct expenses b Net income or (loss) from gaming activities				
	10a b	Gross sales of inventory, less returns and allowances				
	44-					
	b					
	С					
		All other revenue	 		 	
	12 12	Total. Add lines 11a–11d	76225.94			

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).

	All other organizations must complete colu				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	350.00	350.00		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	10450.00	-	10450.00	
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	8650.00		8650.00	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	1783.69		1783.69	
11	Fees for services (non-employees):				
	Management				
	Legal				
	Accounting				
	Lobbying				, ,
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
_	Other				
12 13	Advertising and promotion	2636,24		2636.24	
14	Office expenses				
15	Royalties	-			
16	Occupancy	3000.00		3000.00	
17	Travel	4469.00		4469.00	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	4564.29	4564.29		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
	Talambana	504.57		504.57	
a	Postage	100.00		100.00	
b	Printing & Publications	1076.29	1076.29		
c d	Dues	43128.00		43128.00	
e	Continguent fund,Bond,off equip & apron	808.42		808.42	
f	All other expenses KT Eye Foundation	1673.00		1673.00	
25	Total functional expenses. Add lines 1 through 24f	83193.50	5990.58	77202.92	
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				

⁼Part X **Balance Sheet** (A) Beginning of year (B) End of year 468069.41 468069.41 1 2 2 3 3 76225.94 76225.94 4 4 Receivables from current and former officers, directors, trustees, key 5 employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 7 8 9 Prepaid expenses and deferred charges . 10a Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D b Less: accumulated depreciation 10b 10c 11 11 12 12 Investments—other securities. See Part IV. line 11 13 13 Investments—program-related. See Part IV, line 11 14 14 15 15 Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34) 16 544295.35 16 544295.35 83203.05 17 83203.05 17 Accounts payable and accrued expenses 18 18 19 19 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Pavables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities. Complete Part X of Schedule D 25 25 Total liabilities. Add lines 17 through 25 . . . 26 83203.05 83203.05 26 Organizations that follow SFAS 117, check here ▶ □ and Balances complete lines 27 through 29, and lines 33 and 34. 27 28 28 Fund 29 29 Organizations that do not follow SFAS 117, check here ▶ □ ŏ and complete lines 30 through 34. Net Assets 461092.30 30 461092.30 30 Capital stock or trust principal, or current funds 0 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 6977.11 32 32 Retained earnings, endowment, accumulated income, or other funds 468069.41 33 461092.30 33 34 544295.35

Pai	rt XI Financial Statements and Reporting		•	
			Yes	No
1	Accounting method used to prepare the Form 990: Cash Cash Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			ĺ
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		✓
b	Were the organization's financial statements audited by an independent accountant?	2b		✓
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			ĺ
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		<u></u>
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			ĺ
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			Ì
	issued on a consolidated basis, separate basis, or both:			ĺ
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			l
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			ĺ
	the Single Audit Act and OMB Circular A-133?	3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			ĺ
	required audit or audits, explain why in Schedule O and describe any stone taken to undergo such audits.	3b	i	i

Form **990** (2009)