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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** JULY 1 , 2009, and ending JUNE 30 , 20 10

- 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

9510 W 127TH STREET

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

OVERLAND PARK, KS 66213-3200**D** Employer identification number**45-0489118****E** Telephone number**913-269-6558****F** Group ExemptionNumber ► **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.ASCENSIONKOFC.COM****J** Tax-exempt status (check only one) — ☒ 501(c) () ◀ (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 ► \$ **126,578****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	0
	2	Program service revenue including government fees and contracts	2	0
	3	Membership dues and assessments	3	15598
	4	Investment income	4	286
	5a	Gross amount from sale of assets other than inventory	5a	0
	5b	Less: cost or other basis and sales expenses	5b	0
	5c	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"/>		
	a	Gross revenue (not including \$ 0 of contributions reported on line 1)	6a	105139
	b	Less: direct expenses other than fundraising expenses	6b	61040
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	44099	
7a	Gross sales of inventory, less returns and allowances	7a	1380	
b	Less: cost of goods sold	7b	1889	
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	-509	
8	Other revenue (describe ► Social Event Charges to members, other small fund raisers.)	8	4175	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	63649	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	44183
	11	Benefits paid to or for members	11	0
	12	Salaries, other compensation, and employee benefits	12	0
	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	2702
	16	Other expenses (describe ► Social Events, Kitchen Equip, Volunteer Refreshments / meals)	16	21101
	17	Total expenses. Add lines 10 through 16	17	67897
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-4338
	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	21950
	20	Other changes in net assets or fund balances (attach explanation)	20	-254
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	17357

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	21950	22 17357
23 Land and buildings	0	23 0
24 Other assets (describe ►)	0	24 0
25 Total assets	21950	25 17357
26 Total liabilities (describe ►)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	21950	27 17357

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

Cat No 106421

Form **990-EZ** (2009)

SCANNED SEP 23 2010

65 13

Expenses

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

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

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28a	
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29a	
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30a	
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31a _____

32	
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(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
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(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

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		✓
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		✓
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?		✓
b If "Yes," has it filed a tax return on Form 990-T for this year?		
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 Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0		
b Did the organization file Form 1120-POL for this year?		✓
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?		✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A		
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 39a N/A		
b Gross receipts, included on line 9, for public use of club facilities 39b N/A		
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		✓
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.		✓
41 List the states with which a copy of this return is filed. ▶ NONE		
42a The organization's books are in care of ▶ MARK SHORT Telephone no. ▶ 913-897-0891		
Located at ▶ 11611 W 127TH TERR, OVERLAND APRK, KS ZIP + 4 ▶ 66213		
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)?	Yes	No
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: ▶		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ <input type="checkbox"/>		
and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	Yes	No
		✓
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		✓

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."

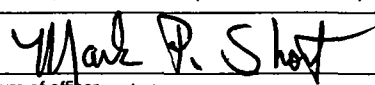
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

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		8/28/10 Date	
	MARK P. Short Treasurer Type or print name and title		8/28/10	
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

Knights Of Columbus, Council #10932
Supporting Documents for Form 990EZ

TAX ID 43-0489118

Line 6, - Net income from special events

Event	Revenues	Costs	Net
Pancake Breakfast	\$14,671	\$7,580	\$7,091
Spaghetti Dinners	\$14,242	\$11,710	\$2,533
Fish Fry	\$46,523	\$28,459	\$18,064
Charity Golf Tournamen	\$22,969	\$12,081	\$10,888
Winefest	\$1,220	\$641	\$579
	\$5,514	\$569	\$4,945
Total	\$105,139	\$61,040	\$44,099

Line 10 - Grants and Allocations + Part III

Donation	Donee	Amount	Description	Relationship
Tootsie Roll Campaign	Lake Mary Home Olathe, KS	\$4,945	Net proceeds from campaign Tootsie rolls were given away and donations were accepted for mentally handicapped	State K of C which we are a member
Youth/Scouts/Scholarships	Church of Ascension 9510 W 127th St Overland Park, KS	\$6,816	Donations for student scholarships, Church Youth Group & BSA	Parish which our group is affiliated
Support our Seminarians Fund, and individual Seminarians	Conception Seminary College, PO Box 502 Conception, MO	\$6,012	Support the seminarians in the diocese.	Diocese which our group is affiliated
Bibles	Church of Ascension 9510 W 127th St. Overland Park, KS	\$3,643	Bibles valued at cost. Provided to Confirmation candidates	Parish which our group is affiliated
Good Samaritan Fund	Church of Ascension 9510 W. 127th St Overland Park, KS	\$10,000	Pastor's fund to assist unemployed of parish	Parish which our group is affiliated
K of C Supreme	Knights of Columbus Supreme Council 1 Columbus Plaza New Haven, CT	\$2,670	Assessments to national K of C Organization.	National organization which we are a member
K of C KS State Assessments	Knights of Columbus State Council 2164 N. Carlton Liberal, KS 67901	\$2,410	Assessments to State K of C organization	State organization which we are a member
Villa St Francis	Villa St Francis	\$1,201	Support for local retirement home	Community Support
Many other smaller amounts	Various	6,487.12	various	Community charities and local causes
Total		44,183.13		

LINE 20 EXPLANATION - \$254 DIFF IN SPREADSHEET USED WHEN CONVERTING FINANCIALS FROM EXCEL TO QUICKBOOKS

Knights Of Columbus, Council #10932
Supporting Documents for Form 990

TAX ID 43-0489118

Part III - Statement of Program Service Accomplishments

- a) Villa St. Francis - Provide free labor for monthly social event.
Help them paint rooms, rake leaves, plant flowers, wash windows in spring and fall.
- b) Provide free labor for parish events, landscaping maintenance, rectory repairs.
- c) Tootsie Roll Campaign - Collect donations for mentally handicapped.
- d) Assist Salvation Army package and deliver food boxes for the needy at Christmas.
- e) Spaghetti Dinners, Fish Fries, Pancake Breakfast, and Golf tournaments were parish events sponsored by the Knights of Columbus. Proceeds were typically used to fund parish expenses, improvements .
And community charity

Part V-A - List of Officers, Directors, Trustees and Key Employees

(A) Name & Address	(B) Title & Hrs/wk	(C) Compensation	(D) Contributions	(E) Expenses
Gene Merlotti 12305 Mastin St Overland Park, KS 66213	Grand Knight 10 hrs /week	None	None	None
Scott Buescher 11266 South Creatlake Drive Olathe, KS 66061	Deputy Grand Knight 2 hrs/week	None	None	None
Wayne Parsons 10721 W. 128th Ct Overland Park, KS 66213	Financial Secretary 2 hrs/week	None	None	None
Mark Short 11611 W 127th Terrace Overland Park, KS 66213	Treasurer 4 hrs/week	None	None	None
Ralph Vosters 11510 S. Rene St. Olathe, KS 66062	Trustee 1 hr/week	None	None	None
Joe Kennedy 12721 Carter Street Overland Park, KS 66213	Trustee 1 hr/week	None	None	None
Bob Ruthig 12738 King Street Overland Park, KS 66213	Trustee 1 hr/week	None	None	None