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Form 990-EZ (2010)

Page 2

Part II Balance Sheets. (see the instructions for Part II.)Check if the organization used Schedule O to respond to any question in this Part II. ☐

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	\$ 19,002	\$ 22,398
23 Land and buildings	0	0
24 Other assets (describe in Schedule O)	0	0
25 Total assets	\$ 19,002	\$ 22,398
26 Total liabilities (describe in Schedule O)	0	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	\$ 19,002	\$ 22,398

Part III Statement of Program Service Accomplishments (see the instructions for Part III.)Check if the organization used Schedule O to respond to any question in this Part III. ☐What is the organization's primary exempt purpose? **RAISE FUNDS FOR RELIGIOUS & CHARITABLE PURPOSE**

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

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

28 CAFE FOR COMMUNITY-MONTHLY CAFE (EXCEPT DECEMBER) SERVES 400+ PATRONS FROM THE PARISH USING 20+ KNIGHTS TO COOK AND SERVE THE FOOD TO PROMOTE PARISH COMMUNITY AND RAISE FUNDS FOR CHARITABLE PURPOSES (Grants \$) If this amount includes foreign grants, check here ☐	28a
29 ID/MLRD TOOTSIE ROLL DRIVE-ANNUAL EVENT HELD UTILIZING MOST OF THE KNIGHTS MEMBERS TO COLLECT DONATIONS ON STREET CORNERS UTILIZING TOOTSIE ROLLS AS AN INCENTIVE TO HAVE DRIVERS DONATE TO THIS CAUSE WHICH ENABLES THE MONEY TO BE DONATED TO 10+ CHARITIES (Grants \$) If this amount includes foreign grants, check here ☐	29a
30 GOLF OUTING-ANNUAL EVENT INVOLVING MANY OF THE KNIGHTS, THEIR FRIENDS & FAMILIES TO ASSIST AND PARTAKE IN THIS FUND RAISING EVENT TO PROMOTE PARISH COMMUNITY ALONG WITH BRINGING AWARENESS TO EVERYONE OF THE CHARITABLE ACTIVITIES OF THE KNIGHTS (Grants \$) If this amount includes foreign grants, check here ☐	30a
31 Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here ☐	31a
32 Total program service expenses (add lines 28a through 31a)	32

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (see the instructions for Part IV.)Check if the organization used Schedule O to respond to any question in this 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) Expenses account and other allowances
ROBERT M WAGNER 4560 CRAB ORCHARD DR, HOFFMAN ESTATES, IL	GRAND KNIGHT/ 5 HRS	0	0	0
JOSEPH FERLITA 1620 BRITTANY LN, HOFFMAN ESTATES, IL	DEPUTY GR KNIGHT/5 HRS			
FRANK J. ZITO 1153 VABERDEEN RD, INVERNESS, IL	FINANCIAL SEC'Y/ 6 HRS			
ROY F. BALDUF 267 W. WELLINGTON DR, PALATINE, IL	TREASURER/ 4 HRS			
JAMES POSCH 7628 CHURCHILL, MORTON GROVE, IL	CHANCELLOR/ 2 HRS			
ROBERT J. SEGUY 506 BRAMPTON LN, ARLINGTON HTS, IL	ADVOCATE/ 4 HRS			
RONALD SCHULZ 2019 SUDBURY DR, HOFFMAN ESTATES, IL	RECORDER/ 4 HRS			
JOHN POSCH 7628 CHURCHILL, MORTON GROVE, IL	3 YR TRUSTEE/ 3 HRS			
JOHN E PASSARELLI 1815 ASHBURY CT, INVERNESS, IL	2 YR TRUSTEE/ 3 HRS			
KENNETH R. DIRNBERGER 9 CUTTERS RUN, SOUTH BARRINGTON, IL	1 YR TRUSTEE/ 3 HRS			