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Form 990-EZ

# 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, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 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

2010

Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service

A For the 2010 calendar year, or tax year beginning 01-01-2010

, and ending 12-31-2010

Check if applicable  
 Address change  
 Name change  
 Initial return  
 Terminated  
 Amended return  
 Application pending

C Name of organization KNIGHTS OF COLUMBUS	
Number and street (or P O box, if mail is not delivered to street address) PO Box 263	Room/suite
City or town, state or country, and ZIP + 4 Springfield, VA 22150	

D Employer identification number

91-2135607

E Telephone number

(703) 569-3927

F Group Exemption  
Number ► 0188G Accounting method  Cash  Accrual Other (specify) ► \_\_\_\_\_I Website: ► [www.stjohnboscofc.org](http://www.stjohnboscofc.org)J Tax-Exempt status (check only one) —  501(c)(3)  501(c)(8) (insert no)  4947(a)(1) or  527H 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 \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ 100,998

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

Check if the organization used Schedule O to respond to any question in this Part I 

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	2,507
	2 Program service revenue including government fees and contracts	2	0
	3 Membership dues and assessments	3	11,320
	4 Investment income	4	50
	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 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000) ►	6a	0
Expenses	b Gross income from fundraising events (not including \$ 87,121 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceed \$15,000) ►	6b	
	c Less direct expenses from gaming and fundraising events	6c	54,775
	d Net income or (loss) from gaming and fundraising events (Add lines 6a and 6b and subtract line 6c)	6d	32,346
	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 in Schedule O)	8	0
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	46,223
	10 Grants and similar amounts paid (list in Schedule O)	10	29,891
Net Assets	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	2,412
	16 Other expenses (describe in Schedule O)	16	0
	17 Total expenses. Add lines 10 through 16	17	32,303
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	13,920
	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	38,603
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	0
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	52,523

**Part II Balance Sheets**Check if the organization used Schedule O to respond to any question in this Part II 

(See the instructions for Part II )

22 Cash, savings, and investments . . . . .  
 23 Land and buildings . . . . .  
 24 Other assets (describe in Schedule O) . . . . .  
 25 **Total assets** . . . . .  
 26 **Total liabilities** (describe in Schedule O) . . . . .  
 27 **Net assets or fund balances** (line 27 of column (B) **must** agree with line 21) . . . . .

(A) Beginning of year	(B) End of year	
38,603	<b>22</b>	52,523
0	<b>23</b>	0
0	<b>24</b>	0
38,603	<b>25</b>	52,523
0	<b>26</b>	0
38,603	<b>27</b>	52,523

**Part III Statement of Program Service Accomplishments**Check if the organization used Schedule O to respond to any question in this Part III 

What is the organization's primary exempt purpose?

Thanks to the efforts of Father Michael J. McGivney, assistant pastor of St. Mary's Church in New Haven and some of his parishioners, the Connecticut state legislature on March 29, 1882, officially chartered the Knights of Columbus as a fraternal benefit society. The Order is still true to its founding principles of charity, unity and fraternity. The Knights of Columbus was formed to render financial aid to members and their families. Mutual aid and assistance are offered to sick, disabled and needy members and their families. Social and intellectual fellowship is promoted among members and their families through educational, charitable, religious, social welfare, war relief and public relief works. The KofC have become the world's foremost Catholic fraternal benefit society. The Order has helped families obtain economic security and stability.

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 Youth Development Programs, General/Other Family and Youth Activities - Catholic values are rooted in the strong bonds of family life. The Knights of Columbus supports these values through family and youth activities. Substance Abuse - Knights of Columbus members regularly participate in and sponsor programs aimed at combating substance abuse. Councils work with police, youth groups and other organizations to conduct educational programs on the dangers of drug and alcohol abuse. The Knights sponsor poster contests for youth on substance abuse. The Order's youth group, the Columbian Squires, participate in programs that publicize the dangers of drunk driving. The council provided 2,600 volunteer hours supporting youth projects (0 0) (Grants \$ 0) 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 )

28a 0

**29 Wellness Programs Culture of Life - The Protection Of Human Life** The Knights of Columbus is unambiguously and proudly pro-life. In accordance with the teachings of the Catholic Church, the Order defends human life from the moment of conception until natural death. Building a new Culture of Life where every human life is welcomed, respected and protected by law is one of the highest priorities of the Order. Community of Involvement - The history of the Knights of Columbus's involvement in community life is a record of outstanding benevolent achievement. Knights volunteer in a variety of charitable enterprises to serve the people and programs of their communities. Volunteerism informed by Christian concern is the hallmark of the Knights of Columbus. It results in outstanding contributions of time and talent to the Catholic Church, our communities, families, young people and brother Knights. Much of the success of the Order's volunteer record can be attributed to the fact that the Supreme Council does not mandate participation in any volunteer initiative. Fraternal and charitable programs arise at the grassroots level to meet the local needs. As the Order has grown, its benevolence has increased. The Order continues to break all of its previous records for charitable contributions and volunteer service. The results of the Order's annual Survey of Fraternal Activity for the year ending Dec. 31, 2006, show that total contributions to charity at all levels reached \$143,816,004 - exceeding the previous year's total by more than \$4 million. The figure includes \$35,133,393 donated by the Supreme Council, and \$108,682,611 in charitable donations by state and local councils, Fourth Degree assemblies and Squire circles. In the past decade, Knights raised and donated nearly \$1.25 billion to numerous charitable causes and volunteered nearly 400 million hours of service. The council provided 3,546 volunteer hours in supporting community projects. The council provided funds of \$3,542 to support community life programs (0 0) (Grants \$ 0) If this amount includes foreign grants, check here

29a 0

**30 Christianity Programs** Supporting the Catholic Church has been a hallmark of the Knights of Columbus since its founding in 1882. From funding the restoration of the facade of St. Peter's Basilica in Rome to operating an usher ministry at a local parish, the Knights of Columbus serves the Church in countless ways. Annually, the Order raises and distributes more than \$45 million to Church groups in support of programs at the local, national and international levels. Local Knights and their families donate more than 25 million hours of volunteer time to the Church each year. The Knights of Columbus provides support for the Catholic Church in many ways, including the funding of many important parish projects at St. Raymond of Penafort Church. Supporting vocations to the priesthood and religious life is a top priority of the Knights of Columbus. The council provided 9,128 volunteer hours to support church projects within the parish. Fund raisers sponsored by the Knights of Columbus Council provided funding to St. Raymond church for their debt reduction program, building fund and religious education program (0 0) (Grants \$ 0) If this amount includes foreign grants, check here

30a 0

**31 Other program services (describe in Schedule O)** (Grants \$ ) If this amount includes foreign grants, check here

31a 0

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

32 0

**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-) <small>(If not paid, enter -0-.)</small>	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
See Additional Data Table				

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

Check if the organization used Schedule O to respond to any question in this Part V

**33** Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O

**34** Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)

**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, explain in Schedule O 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 a section 501(c)(4), 501(c)(5), or 501(c)(6) organization 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? (see instructions)

**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 tax year covered by this return?

**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

**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 ► \_\_\_\_\_

**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 did it engage in an excess benefit transaction in a prior year that has not been reported on any of its 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 ► \_\_\_\_\_

**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** No

**41** List the states with which a copy of this return is filed ► \_\_\_\_\_

**42a** The organization's books are in care of ► William Vitaletti Telephone no ► (703) 569-9316  
7555 Cloud Ct  
Located at ► Springfield, VA ZIP + 4 ► 22153

**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)?  
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 ► **43** and enter the amount of tax-exempt interest received or accrued during the tax year

**44a** Did the organization maintain any donor advised funds? If "Yes", *Form 990 must be completed instead of Form 990-EZ.*

**b** Did the organization operate one or more hospital facilities during the year? If "Yes," *Form 990 must be completed instead of Form 990-EZ*

**c** Did the organization receive any payments for indoor tanning services during the year?

**d** If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

	Yes	No
<b>33</b>		No
<b>34</b>		No
<b>35a</b>		No
<b>35b</b>		
<b>36</b>		No
<b>37b</b>		No
<b>38a</b>		No
<b>38b</b>		
<b>39a</b>		
<b>39b</b>		
<b>40b</b>		
<b>40e</b>		No
<b>42b</b>		No
<b>42c</b>		No
<b>43</b>		
<b>44a</b>		
<b>44b</b>		No
<b>44c</b>		No
<b>44d</b>		

	<input type="checkbox"/> Yes	<input type="checkbox"/> No
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R must be completed instead of Form 990-EZ	<input type="checkbox"/> 45	<input type="checkbox"/> No
45a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R must be completed instead of Form 990-EZ	<input type="checkbox"/> 45a	<input type="checkbox"/> No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	<input type="checkbox"/> 46	<input type="checkbox"/> No

**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 47-49b and 52.

Check if the organization used Schedule O to respond to any question in this Part VI  . . . . .

	<input type="checkbox"/> Yes	<input type="checkbox"/> No
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	<input type="checkbox"/> 47	<input type="checkbox"/>
48 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<input type="checkbox"/> 48	<input type="checkbox"/>
49a Did the organization make any transfers to an exempt non-charitable related organization?	<input type="checkbox"/> 49a	<input type="checkbox"/>
b If "Yes," was the related organization a section 527 organization?	<input type="checkbox"/> 49b	<input type="checkbox"/>
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

50(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

51(d) Total number of other independent contractors each receiving over \$100,000  . . . . .

52 Did the organization complete Schedule A? **NOTE:** All Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A  Yes  No

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.

<b>Sign Here</b>	Signature of officer <input type="checkbox"/> 2011-04-12		
	John Tracy Financial Secretary Type or print name and title <input type="checkbox"/> Date		
<b>Paid Preparer's Use Only</b>	Preparer's signature <input type="checkbox"/>	Date <input type="checkbox"/>	Check if self-employed <input type="checkbox"/> Preparer's taxpayer identification number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4 <input type="checkbox"/>		EIN <input type="checkbox"/> Phone no. <input type="checkbox"/>

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

## Additional Data

**Software ID:** 10000077  
**Software Version:** v1.00  
**EIN:** 91-2135607  
**Name:** KNIGHTS OF COLUMBUS

### Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(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
Cabell Angle 6013 Ridgeford Drive Burke, VA 22015	Trustee 10	0	0	0
Robert Billeaud 8914 Magnolia Rd Fairfax Station, VA 22039	Trustee 10	0	0	0
William Vitaletti 7555 Could Ct Springfield, VA 22153	Treasurer 20	0	0	0
John Tracy 9136 Scott Street Springfield, VA 22153	Financial Secretary 20	0	0	0
James Kendall 8695 Bent Arrow Court Springfield, VA 22153	Grand Knight 20	0	0	0
Vance Stewart 7581 Vogels Way Springfield, VA 22153	Trustee 10	0	0	0

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

## **Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No 1545-0047

2010

## Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

**Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.**

► **Attach to Form 990 or Form 990-EZ.** ► **See separate instructions.**

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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**Employer identification number**

91-2135607

**Part I Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a**  Mail solicitations
- b**  Internet and e-mail solicitations
- c**  Phone solicitations
- d**  In-person solicitations
- e**  Solicitation of non-government grants
- f**  Solicitation of government grants
- g**  Special fundraising events

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

Yes  No

**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

**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	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
		<u>5-Car Raffle</u> (event type)	<u>Regatta Parking</u> (event type)	<u>5</u> (total number)	
Revenue	1 Gross receipts . . .	42,124	14,950	30,047	87,121
	2 Less Charitable contributions . . .	0	0	0	0
	3 Gross income (line 1 minus line 2) . . .	42,124	14,950	30,047	87,121
Direct Expenses	4 Cash prizes . . .	0	0	0	0
	5 Non-cash 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 . .	27,862	2,108	24,805	54,775
	10 Direct expense summary Add lines 4 through 9 in column (d) . . . . .				54,775
	11 Net income summary Combine lines 3 and 10 in column (d) . . . . .				32,346

**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 Non-cash prizes . . . .				
	4 Rent/facility costs . . . .				
	5 Other direct expenses . . . .				
	6 Volunteer labor . . . .	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d) . . . . .				
	8 Net gaming income summary Combine lines 1 and 7 in column (d) . . . . .				
	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? . . . . .				<input type="checkbox"/> Yes <input type="checkbox"/> No
	b If "No," Explain . . . . .				
	10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . .				<input type="checkbox"/> Yes <input type="checkbox"/> No
	b If "Yes," Explain . . . . .				

11 Does the organization operate gaming activities with nonmembers?  Yes  No

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?  Yes  No

13 Indicate the percentage of gaming activity operated in

13a	
13b	

a The organization's facility . . . . .

b An outside facility . . . . .

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name ►

Address ►

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ► \$ \_\_\_\_\_

c If "Yes," enter name and address

Name ►

Address ►

## 16 Gaming manager information

Name ►

Gaming manager compensation ► \$

Description of services provided ►

 Director/officer Employee Independent contractor

## 17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$

**Part IV** Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
SchG_P02_S00_L01	Schedule G, Part II, Line 1	The K of C has seven major fund raising events each year. The 5-Car Raffle is a multi-parish event managed by All Saints Church in Manassas, VA. Each participating organization sells raffle tickets to parishioners and then returns ticket stubs and monies collected to All Saints. All Saints then determines each participating organizations share (averages 60%) of the proceeds and returns this amount after the drawing. Our second major fund raising event is Regatta Parking which involves assisting the Park Service in parking cars for Regatta events. Our organization is paid for the service based on the monies collected for parking fees.
SchG_P02_S00_L02	Schedule G, Part II, Line 2	None
SchG_P02_S00_L03	Schedule G, Part II, Line 3	None
SchG_P02_S00_L04	Schedule G, Part II, Line 4	None
SchG_P02_S00_L05	Schedule G, Part II, Line 5	None
SchG_P02_S00_L06	Schedule G, Part II, Line 6	None
SchG_P02_S00_L07	Schedule G, Part II, Line 7	None
SchG_P02_S00_L08	Schedule G, Part II, Line 8	None
SchG_P02_S00_L09	Schedule G, Part II, Line 9	Expenses for the 5-Car Raffle include primarily printing costs and postage. Expenses for Regatta Parking primarily consist of food and refreshments for the volunteers that assist with the parking.
SchG_P02_S00_L10	Schedule G, Part II, Line 10	None

**SCHEDULE O**  
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ****2010****Open to Public  
Inspection**Department of the Treasury  
Internal Revenue Service**Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
► Attach to Form 990 or 990-EZ.****Name of the organization**

KNIGHTS OF COLUMBUS

**Employer identification number**

91-2135607

Identifier	Return Reference	Explanation
F99Z_P01_S00_L10	Form 990-EZ, Part I, Line 10	Donations to St. Raymond Catholic Church \$ 9049 Donations to Programs for the Disabled 7184 Donations to Human Needs and Pro-Life 6526 Donations to Health & Serve Organizations 300 Donations to Community Projects 3583 Donations to Scouting Programs 689 Donations to Youth Programs 2450 Scholarships 200