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Form **990-PF**

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated às à Private Foundation

OMB No. 1545-0052

2010

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2010, or tax year beginning 7/01 , 2010, and ending 6/30 2011 G Check all that apply: X Initial Return of a former public charity initial return Final return Amended return Address change Name change Employer identification number ST. MARYS COUNCIL NO 1470 KNIGHTS OF 33-1109715 COLUMBUS CHARITIES, INC. В Telephone number (see the instructions) PO BOX 152 301-475-9224 LEONARDTOWN, MD 20650 C If exemption application is pending, check here D 1 Foreign organizations, check here . . X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check Check type of organization: here and attach computation . Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated Fair market value of all assets at end of year J Accounting method: X Cash Accrual under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination 85,745. (Part I, column (d) must be on cash basis.) under section 507(b)(1)(B), check here Part | Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books income income for charitable columns (b), (c), and (d) may not necespurposes sarily equal the amounts in column (a) (cash basis only) (see the instructions).) 71,318 Contributions, gifts, grants, etc, received (att sch) 2 Ck I if the foundn is not req to att Sch B Interest on savings and temporary * "人 331 331 N/A cash investments Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 1 - 8 REVENUE 6a Net gain/(loss) from sale of assets not on line 10. **b** Gross sales price for all assets on line 6a 1918 (2.1.20) A DO A SHAPE SEE SEE SE では、いなりを食べると 如《福田傳稿·明華· Capital gain net income (from Part IV, line 2) Net short-term capital gain. Income modifications 10 a Gross sales less returns and allowances A. 1.3 b Less Cost of goods sold **美国企业等** (1) 多形的生活 宝 **建工程、编码**。 7 1 41 52 2 4 40 50 1 1 4 work in griptweitheite, it c Gross profit/(loss) (att sch) Other income (attach schedule) 12 Total. Add lines 1 through 11. 71,649 331 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages. 15 Pension plans, employee benefits 16a Legal fees (attach shedule)
b According less (attach sch), (1SEE. ST 1
COther profilees (attach sch). 1,350 1,350 Interest Taxes (attach) schigguiek see instr)

Depréeration (attach) sch) and deptetion

Travel, contrerences, and meetings 24 Total expenses.
25 Contributions, gifts, ...
26 Total expenses and on-Add lines 24 and 25

27 Subtract line 26 from line 12:
a Excess of revenue over expenses and disbursements
b Net investment income (if negative, enter 0-).
C Adjusted net income (if negative, enter 0-).
C Adjusted net income (if negative, enter 0-). 6. <u>,</u>356. 1,350 6 62,620 62,620. 6 63,976 63,970. 7,673 325 Form 990-PF (2010)

D	<u> </u>	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year	End	of year
Par	<u>T 11 </u>	Balance Sheets Attached scredules and amounts in the description column should be for end of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	56,616.	63,958.	63,958.
	2	Savings and temporary cash investments	21,456.	21,787.	
		Accounts receivable	227.500.		22//0/.
	"	Less: allowance for doubtful accounts			
	1	Pledges receivable			
	"	Less allowance for doubtful accounts		+	- 4 3
	_	Grants receivable			
	5				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7	Other notes and loans receivable (attach sch)			1
Ą	i	Less: allowance for doubtful accounts ▶			
Š	8	Inventories for sale or use			
A S S E T	9	Prepaid expenses and deferred charges			
s	10:	Investments – U.S and state government obligations (attach schedule)			
	١,	nivestments — corporate stock (attach schedule)		·- <u>·</u>	
	1	: Investments — corporate bonds (attach schedule)			
	1	·	14	1,	
	''	Investments — land, buildings, and equipment basis			در دارد. در دارد استفاد استان در استان اس
		Less: accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans.			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment: basis.		17 27 19	13.20 14. 14. 16. 16.
		Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe \(\bigcup \) Total assets (to be completed by all filers \(-\)			
	10	see instructions Also, see page 1, item I)	78,072.	85,745.	85,745.
Ļ	17	Accounts payable and accrued expenses			ALEMAN AND AND A
I	18	Grants payable			
A B	19	· ·			** Os. 24
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			
- 1	21	Mortgages and other notes payable (attach schedule)			
Ţ	22	Other liabilities (describe)			
Ė					
<u> </u>	23	Total liabilities (add lines 17 through 22) Foundations that follow SEAS 117 check here	0.	0.	
	ļ	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			TARING PARTY OF
ΝF	24	Unrestricted			
N F E U T N	25	Temporarily restricted			
D	26	Permanently restricted			WART THE WARTER THE WART
A S S A E T A	1	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
S A E L T A	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, building, and equipment fund			
o E	29	Retained earnings, accumulated income, endowment, or other funds	78,072.	85,745.	
O E R S	30	Total net assets or fund balances (see the instructions)	78,072.	85,745.	
	31	Total liabilities and net assets/fund balances (see the instructions)	78,072.	85,745.	
Parl	111	Analysis of Changes in Net Assets or Fund Balance		03, 143.	
					
1	Total	net assets or fund balances at beginning of year — Part II, colui of-year figure reported on prior year's return).	mn (a), line 30 (must ag	ree with	78,072.
2		r amount from Part I, line 27a	••	2	7,673.
		•	•	3	1,013.
		increases not included in line 2 (itemize)			QE 7/E
		lines 1, 2, and 3		5	85,745.
		ises not included in line 2 (itemize)	Port II. column /b) III	 	85,745.
<u> </u>	rotar	net assets or fund balances at end of year (line 4 minus line 5)	– rait ii, column (b), iii	16 30 6	65, 745.

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Part VI instructions

Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

Part W Excise Tax Based on Investment Income (section 4940(a), 4940(b), 4940(c), or 498 — see the instructions) Date for funger of determation letter: (attach copy of letter if increasary — see instr.) Date of ruling or determation letter: (attach copy of letter if increasary — see instr.) Date of ruling or determation letter: (attach copy of letter if increasary — see instr.) Date of ruling or determation letter: (attach copy of letter if increasary — see instr.) Date of the control of the copy of letter if increasary — see instr.) Date of the control of the copy of the property of	Form 990-PF (2010) ST. MARYS COUNCIL NO 1470 KNIGHTS OF 33-1109	715 Page
Date of unique of determination letter:	Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the ins	structions)
b Domestic foundations that meet the section 4940(e) requirements in Part V. check here	1 a Exempt operating foundations described in section 4940(d)(2), check here	Server Statistics
check here		
c. All other domestic Soundations enter 2% of the 27b Evernyt foreign organizations enter 4% of Part I, line 12, column (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter 40-) 3 Add lines 1 and 2 5 Subtitle 4 (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter 40-) 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter 40- 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter 40- 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter 40- 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter 40- 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter 40- 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter 40- 6 Exempt foreign organizations — Lax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6 C data data data data data data data da		
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1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or infervene in any political campaign?. b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition? If the answer is 'Ves' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. C Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \(^{\infty} \sigma^{\infty} \) 0. (2) On foundation managers \(^{\infty} \sigma^{\infty} \) 0. Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \(^{\infty} \sigma^{\infty} \) 0. (2) On foundation managers \(^{\infty} \sigma^{\infty} \) 0. Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes, attach a conformed copy of the changes. 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? bif 'Yes,' has if filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year? By language in the governing instrument, or By language in the governing instrument, or By language in the governing instrument, or By language in the governing instrument in the year? If 'Yes,' complete Part II, column (c), and Part XV The the states to which the foundation furnished a copy of Form 990-PF to the Attorney General for designate) of each state as required by General Instruction Gr If	Part VII-A Statements Regarding Activities	
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		Form 990-PF (2010)

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Par	t VII-A Statements Regarding Activities (Continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?			12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exempt Website address	otion applic	ation?	13	Х	
14		one no.	201-4	75-0	224	
14	Located at ► 20045 TOWER HILL ROAD LEONARDTOWN MD		3 <u>01</u> -4	172-3	224	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check he		720	N/A		
13	and enter the amount of tax-exempt interest received or accrued during the year	1	15	N/ F		N/A
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other bank, securities, or other financial account in a foreign country?	r authority	over a	16	Yes	No X
,	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If 'Yes,' enter the foreign country ►	e name of t	he	<u> </u>	<u> </u>	
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			ļ	Yes	No
1 a	During the year did the foundation (either directly or indirectly):	—			: ' `	3.5
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			Ţ.,
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	[] v	5	,		.,
	disqualified person?	Yes	X No		1.2	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No	. 5.5		
		∐ Yes	[X] No	, ,	Teal of the	₹¥7.
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes	XNo	# / 		
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes	XNo	4) ji -c.		
t	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instru	ın ctions)? .		1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	•	$\cdot \Box$	i de		Te :
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted act that were not corrected before the first day of the tax year beginning in 2010?	ts,		ئ <u>د</u> 1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):					
a	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?	Yes	XNo			
	If 'Yes,' list the years ► 20, 20, 20	_	_	1,01		
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 49 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 494 all years listed, answer 'No' and attach statement — see the instructions)	42(a)(2) 12(a)(2) to		2 b	N	/A
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the year	s here.			7.2	いけ湯
	▶ 20, 20, 20			1 1		(·]
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
t	of If 'Yes,' did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation of disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approby the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; o (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010.).	on ved '		3b	N	'A_
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?			4ъ	#-	X
BAA			Fo	rm 990)-PF (2	2010)

Form 990-PF (2010) ST. MARYS COUNCIL				09715	Page
Part VII-B Statements Regarding Activit	ies for Which Forn	n 4720 May Be Rec	uired (continued)		
5a During the year did the foundation pay or incu	7				, ,
(1) Carry on propaganda, or otherwise attempt	_		Yes [X	NO .	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ation drive?			No	
(3) Provide a grant to an individual for travel,	study, or other similar	purposes /	∐ Yes ∑	No	1
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	han a charitable, etc, o i 4940(d)(2)? (see instr	rganization described uctions)	Yes X] No	Fig. 14 Page 1
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientifi in of cruelty to children	c, literary, or or animals? .	Yes X	No 🏥	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regar	qualify under the exception disaster assistance	otions e	5 b	N/A
Organizations relying on a current notice rega	rding disaster assistan	ce check here .	. ►		**************************************
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respons	the foundation claim exsibility for the grant? .	remption from the	. N/A Yes]No	
If 'Yes,' attach the statement required by Regu	ulations section 53 494	5-5(d).		樂	粉解
6a Did the foundation, during the year, receive ar on a personal benefit contract?	•	•	Yes [X]No	
b Did the foundation, during the year, pay premi If 'Yes' to 6b, file Form 8870	iums, airectly or inairec	cuy, on a personal bene	nit contract?	6b	X
7a At any time during the tax year, was the found	dation a party to a proh	iibited tax shelter transa	action? Yes X		
b If yes, did the foundation receive any proceed	s or have any net incor	me attributable to the tr	ansaction? .	N/A 7b	
Part VIII Information About Officers, Di	irectors, Trustees,	Foundation Manag	gers, Highly Paid I	Employees	5,
and Contractors					
1 List all officers, directors, trustees, foundatio				1455	
(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 and deferred compensation	(e) Expens other allo	
SEE STATEMENT 4					
z		0.	0.		0.
				j	
				 	
				<u> </u>	
2 Compensation of five highest-paid employee					 -
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	
NONE	-		compensation		
	-				
					
Total number of other employees paid over \$50,000	TTE 402061 0		., <u> </u>	5	0 DE (2010)

	-1109715 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Part VIII Information About Officers, Directors, Part VIII Information About Officers, Directors, Director	aid Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	(c) compensation
Total number of others receiving over \$50,000 for professional services	▶ 0
Part IX=A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 <u>N/A</u>	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. 1 N/A	Amount
2	
All other program-related investments See instructions.	
3	
Total. Add lines 1 through 3	b 0.
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Part X. Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. purposes: a Average monthly fair market value of securities. 1b 88 **b** Average of monthly cash balances c Fair market value of all other assets (see instructions) . 10 d Total (add lines 1a, b, and c) 1 d e Reduction claimed for blockage or other factors reported on lines 1a and 1c 0 (attach detailed explanation) 0. Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d. 88,242. Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions) 1,324 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 86,918 Minimum investment return. Enter 5% of line 5 6 4,346. Part XI: Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and do not complete this part.) and certain foreign organizations check here 4,346 Minimum investment return from Part X, line 6 2a 7. 2a Tax on investment income for 2010 from Part VI. line 5. b income tax for 2010. (This does not include the tax from Part VI) 2b 2 c c Add lines 2a and 2b 3 3 Distributable amount before adjustments Subtract line 2c from line 1 4 4 Recoveries of amounts treated as qualifying distributions 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 5 from line 5. Enter here and on Part XIII, line 1 339 Part:XII: Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: 63,970. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1 a 1 b **b** Program-related investments — total from Part IX-B . 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes. Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3 a 36 **b** Cash distribution test (attach the required schedule) 4 63,970 Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions) 5 Adjusted qualifying distributions. Subtract line 5 from line 4 6 63,970. Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				4,339.
2 Undistributed income, if any, as of the end of 2010:				
a Enter amount for 2009 only			0.	
b Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2010:	•			•
a From 2005				,
b From 2006				•
c From 2007				,
d From 2008			•	
e From 2009	: .		, , ,	y ===4≥ #
f Total of lines 3a through e	0.			,
4 Qualifying distributions for 2010 from Part			, ,	-
XII, line 4 ► \$ 63, 970.				* *** ** *** ***
a Applied to 2009, but not more than line 2a			0.	رِ اِنْ اِنْ اِنْ اِنْ اِنْ اِنْ اِنْ اِن
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus	0.	The state of the state of	pate the year and with the end of	
(Election required — see instructions)		Contraction 1538 to the	the end of the same	4,339.
d Applied to 2010 distributable amount	59,631.		11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
e Remaining amount distributed out of corpus .	0.	10 Table 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	建光量 1994年1111	0.
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the		The said of the said	1. 古山北京山北京	TERM TO A COMP TO A SECOND SEC
same amount must be shown in column (a).)	丁件 智斯 使荒芜湖	The state of the s		
		Maria Maria		
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5 .	59,631.	为杨素系。曾	域關悶於必須	
· ·	Sugar Sugar		公 为 公司被数据为38	TOTAL PROPERTY.
b Prior years' undistributed income Subtract line 4b from line 2b	M. S.	0.		A STATE OF THE STA
c Enter the amount of prior years' undistribut-	一大學一大學			
ed income for which a notice of deficiency has been issued, or on which the section	1			
4942(a) tax has been previously assessed	1.5 1 \$1-2.5 (1) 15 15 15	0.	1 A 15 (15 A) GG (15	A STATE OF THE STA
d Subtract line 6c from line 6b Taxable	The state of the state of		The first of the second	
amount - see instructions		0.	<u> </u>	in the contract of the
e Undistributed income for 2009 Subtract line 4a from			0.	
line 2a. Taxable amount — see instructions				
f Undistributed income for 2010. Subtract lines	, , , , , , , , , , , , , , , , , , , ,	#15 10 5 2 P 15 10 10 10 10 10 10 10 10 10 10 10 10 10	Market Market Comment of the Comment	
4d and 5 from line 1. This amount must be			,	0.
distributed in 2011		, , , , , , , , , , , , , , , , , , ,		,
7 Amounts treated as distributions out of corpus to satisfy requirements imposed	İ			
by section 170(b)(1)(F) or 4942(g)(3)		, ;	,	· ,
(see instructions)	0.			
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	59,631.			
10 Analysis of line 9:				
a Excess from 2006				<u>'</u>
b Excess from 2007	7			٠
c Excess from 2008	7 .		1	
d Excess from 2009				
e Excess from 2010 59, 631			<u></u>	
				Form 990-PF (2010)

Part XIV Private Operating Foundati			VII-A guestion 9	33-1103/1	N/A
1 a If the foundation has received a ruling or is effective for 2010, enter the date of the	determination letter				
b Check box to indicate whether the founda		erating foundation	described in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
b 85% of line 2a .		ļ <u></u> .			
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities			 		
 Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c 					·
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter.					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income	<u> </u>		 _	145.000	
Part:XV. Supplementary Information assets at any time during the	(Complete this le year — see in	part only it the structions.)	organization nad	a \$5,000 or mor	e in
Information Regarding Foundation Managers as List any managers of the foundation who close of any tax year (but only if they have NONE)	have contributed me	ore than 2% of the than \$5,000). (See	total contributions re section 507(d)(2))	ceived by the found	lation before the
b List any managers of the foundation who a partnership or other entity) of which the NONE	own 10% or more o foundation has a 10	f the stock of a cor 0% or greater inter	rporation (or an equal rest.	lly large portion of t	he ownership of
2 Information Regarding Contribution, Grad Check here ► X if the foundation only r requests for funds If the foundation make complete items 2a, b, c, and d	nakes contributions s gifts, grants, etc,	to preselected cha (see instructions)	aritable organizations to individuals or orgai	nizations under othe	
a The name, address, and telephone number	er of the person to v	vhom applications	should be addressed.		
b The form in which applications should be	submitted and infor	mation and materia	als they should includ	e	
• Any submission doublines					·
c Any submission deadlines					
d Any restrictions or limitations on awards, s	such as by geograph	hical areas, charita	ble fields, kinds of ins	stitutions, or other f	actors:

3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount		
	substantial contributor	recipient				
Name and address (home or business) a Paid during the year SEE STATEMENT 5	any roundation manager or substantial contributor	recipient	contribution	, modifi		
Total			► 3a	62,620.		
b Approved for future payment						
Total		<u> </u>	▶ 3b			

Part XVI-A Analysis of Income-Producing Activities

Enter gross	amounts unless otherwise indicated.	Unrelate	d business income	Exclude	d by section 512, 513, or 514	1-3
-		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (see the instructions)
Program service revenue: a				code	 	<u> </u>
		+				
				 		
		 		+		
		 		+		
·		1		1		
a Fees	and contracts from government agencies					
_	ership dues and assessments					
	on savings and temporary cash investments			14	331.	
4 Divide	nds and interest from securities					
5 Net re	ntal income or (loss) from real estate		*;		· · · · · · · · · · · · · · · · · · ·	, , , , ,
a Debt-f	inanced property	ļ				
	ebt-financed property			 		
	tal income or (loss) from personal property	ļ		<u> </u>		
	investment income		 	ļ		
	(loss) from sales of assets other than inventory			 		
	come or (loss) from special events	ļļ		├ ──	<u> </u>	
	profit or (loss) from sales of inventory				A CONTRACTOR STATE	E. Constituting the state of the last
11 Other		 		* 'L. 'V.	AT I THE REPORT OF THE PROPERTY OF THE PROPERT	場合は必然の情報
		 				
		 		 -		
		 		 		
u		 		 		
12 Subtot	tal, Add columns (b), (d), and (e)	34.00		2500	331.	7
	tal. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	See Charles			331. 13	331.
13 Total.	tal. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculati			***************************************		331.
13 Total. See workst	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate	ons.)	shment of Exemp		13	331.
13 Total. See worksh	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompli		t Purpe	oses 13	
13 Total. See worksh	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompli		t Purpe	oses 13	
13 Total. See workst Part:XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate	ons.) e Accompli		t Purpe	oses 13	
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13 Total. See workst Part:XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompli		t Purpe	oses 13	
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13 Total. See workst Part:XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompli		t Purpe	oses 13	
13 Total. See workst Part:XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompli		t Purpe	oses 13	
13 Total. See workst Part:XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompli		t Purpe	oses 13	
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13 Total. See workst Part:XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompli		t Purpe	oses 13	
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13 Total. See workst Part:XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompli		t Purpe	oses 13	
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13 Total. See workst Part:XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompli		t Purpe	oses 13	
13 Total. See workst Part:XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompli		t Purpe	oses 13	
13 Total. See workst Part:XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompli		t Purpe	oses 13	
13 Total. See workst Part:XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompli		t Purpe	oses 13	
13 Total. See workst Part:XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompli		t Purpe	oses 13	y to the ne instructions.)
13 Total. See workst Part:XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompli		t Purpe	oses 13	
13 Total. See workst Part:XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculate Relationship of Activities to the	ons.) e Accompli		t Purpe	oses 13	

Form 990-PF (2010) ST. MARYS COUNCIL NO 1470 KNIGHTS OF 33-1109715 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

										Yes	N.
1 Did the	e organization directl bed in section 501(c)	ly or indirectly e	engage in any of t	he following wit	th any o	ther organizati	on			162	No
descrit relatin	bed in section 501(c) g to political organiz) of the Code (d ations?	ther than section	501(c)(3) organ	nizations	s) or in section	527,			5.5	1,-1
	ers from the reportin		a noncharitable e	exempt organiz	ation of				* * ' ,	1	111
(1) Ca	•	9							1a(1)	. 35°12.	X
	her assets .			•					1a (2)		X
• •	transactions:		., .		••	•		•		THE REAL PROPERTY.	18181
	les of assets to a no	ncharitable exe	empt organization						المختشدة (1b (1)	· March	X
• •	rchases of assets from				•				1b (2)	-	X
• • •	ental of facilities, equ					• •		` '	1b (3)		X
	embursement arrang				••	•		۱ ۱	1b(4)		X
` '	ans or loan guarante				•	•		ŀ	1 b (5)		X
, ,	erformance of service		up or fundraising :			•		}	1b (6)		X
• -			-					` '}			X
C Shann	g of facilities, equipm	nent, mailing is	sis, other assets,	or paid employe	ees			۱ ،	1c		
d If the a	answer to any of the	above is 'Yes,'	complete the folio	wing schedule.	Colum	n (b) should alv	ways show th	ne fair m	arket valu	ue of	
the go	answer to any of the ods, other assets, or ansaction or sharing	arrangement, s	by the reporting the how in column (d)	oundation. If the theorem is the value of the	e rouna le goods	ation received s, other assets,	ess than fai or services	r market received	t value in 1.		
(a) Line no.	(b) Amount involved		of noncharitable exemp			Description of trai					<u></u>
N/A						·	/				
											
											
											
		 									
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		<u> </u>									
	foundation directly or ped in section 501(c)		ated with, or relate ther than section !	ed to, one or m 501(c)(3)) or in	ore tax- section	exempt organiz 527?	zations		XYes	ים	No
	,' complete the follow a) Name of organiza		(h) Type	of organization) Description	of rolat	ionchin		
	NCIL # 1470		501 (C) (8)	or organization		SHARED EL				סידיוא	<u></u>
NOC COOL	NC1L # 14/0		301 (C) (8)			AND HISTO				MIL	<u> </u>
						RELATIONS		CONTI	DILON		
						KELATIONS	nir.				
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correc	penalties of perjury, I decla t, and complete. Declaration	are that I have exam in of preparer (other	ined this return, includin than taxpayer or fiduciar	g accompanying sch y) is based on all in	lormation	of which preparer ha	s any knowledge	nowleage a	and belief, it	is true,	
Sign	a 1										
Here 📐	William !.	Kun	Ш		_ _2	-14-12	TRE	45 40	~		
s	ignature of officer or trustee	e			Date		Title				
	Print/Type preparer's na	ame	Prempreis su	Pate A) Alin	ALL CH	Pate	Check if	ıf f	PTIN		
Paid	MARY ANN MU	RRAY, CPA	MARY A	HY MURRAY,	ZPA	12/10/1	2 self-employ	red_ I	200523	545	
Preparer			MSLEY & SCH	RADER, LL	dU		Firm's EIN ►				
Use Only			E NOTCH RD								
OSE OILLY	Firm's address -	CALIFORNIA					Phone no	(301)	862-3	367	
BAA			·						Form 990		2010)
w 1											/

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545-0047

2010

Name of the organization ST MARYS CO	OUNCIL NO 1470 KNIGHTS OF	Employer identification number
COLUMBUS CH	ARITIES, INC.	33-1109715
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	n
	4947(a)(1) nonexempt charitable trust not	treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treat	ted as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered Note. Only a section 501(c)(7), (8), or	by the General Rule or a Special Rule . (10) organization can check boxes for both the General	Rule and a Special Rule. See instructions.
General Rule		
X For an organization filing Form 99 contributor (Complete Parts I and	0, 990-EZ, or 990-PF that received, during the year, \$5,0 II.)	00 or more (in money or property) from any one
Special Rules		
$509(a)(1)$ and $170(b)(1)(A)(v_i)$, and	on filing Form 990 or 990-EZ, that met the 33-1/3% support d received from any one contributor, during the year, a co 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Comple	ontribution of the greater of (1) \$5,000 or
aggregate contributions of more th	 organization filing Form 990 or 990-EZ, that received fr. lan \$1,000 for use exclusively for religious, charitable, scin or animals. Complete Parts I, II, and III. 	om any one contributor, during the year, ientific, literary, or educational purposes, or
contributions for use exclusively for If this box is checked, enter here to purpose. Do not complete any of to) organization filing Form 990 or 990-EZ, that received from religious, charitable, etc, purposes, but these contributions that were received during the year he parts unless the General Rule applies to this organiza	ions did not aggregate to more than \$1,000. for an <i>exclusively</i> religious, charitable, etc.
religious, charitable, etc, contributi	ions of \$5,000 or more during the year.	► \$
990-PF) but it must answer 'No' on Pa	overed by the General Rule and/or the Special Rules does art IV, line 2 of their Form 990, or check the box on line F it the filing requirements of Schedule B (Form 990, 990-E	H of its Form 990-EZ, or on line 2 of its Form
BAA For Paperwork Reduction Act N 990EZ, or 990-PF.	Notice, see the Instructions for Form 990,	Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

	B (Form 990, 990-EZ, or 990-PF) (2010)		ige 1	of 1	of Part I
Name of org	anization ARYS COUNCIL NO 1470 KNIGHTS OF		33-11(dentification number	
Part I	Contributors (see instructions.)				
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	ıs	(d) Type of contr	ribution
1	ST.MARY'S COUNCIL #1470 K OF C	-		Person X Payroli	
	PO BOX 152 LEONARDTOWN, MD 20650	\$ <u>45,</u>		Noncash (Complete Part is a noncash cor	. It if there ntribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	s	(d) Type of contri	ibution
2	SUPREME TREASURER, K OF C CHARITIES	\$ 12,.		Person X Payroll	
	ONE COLUMBUS PLAZA NEW HAVEN, CT 06510			Noncash (Complete Part is a noncash cor	II if there atribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	s	(d) Type of contri	bution
		\$		Person Payroll Noncash (Complete Part s a noncash con	II if there itribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	s	(d) Type of contri	bution
		\$	F	Person Payroll Noncash (Complete Part is a noncash con	II if there tribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	5	(d) Type of contril	bution
		\$	F	Person Payroll Noncash (Complete Part Is a noncash conf	II if there tribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions		(d) Type of contrib	oution
		\$	P	Person Payroll Noncash Complete Part I	I if there tribution)
BAA	TEEA0702L 10/26/10	Schedule B (For	m 990, 99	90-EZ, or 990-PI	F) (2010)

of Part I

Page

of 1 of P
Employer identification number

of Part II

Name of organization

ST. MARYS COUNCIL NO 1470 KNIGHTS OF

33-1109715

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
BAA		Schedule B (Form 990, 990-EZ	000 55: 105:

Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2010)			Page 1 of 1	of Part III		
Name of organ				Employer identificati	ion number		
	RYS COUNCIL NO 1470 KNIGHTS			33-1109715			
Part III	Exclusively religious, charitable, e organizations aggregating more t	etc, individual contributio	ns to sect	ion 501(c)(7), (8), or (10)	a lipo optii.		
	• • • • •	· · · · · · · · · · · · · · · · · · ·			g line entry.		
	For organizations completing Part III, enter contributions of \$1,000 or less for the year.	rtotal of <i>exclusively</i> religious, cl . (Enter this information once. S	naritable, etc See instructio	i, ins)►\$	N/A		
(a)	(b)	(c)		(d)			
No. from Part I	Purpose of gift	Use of gift		Description of how gift	is held		
<u> </u>	N/A	<u></u>					
		(e)		<u> </u>			
		Transfer of gift					
	Transferee's name, addres		Rela	ationship of transferor to trans	feree		
	<u> </u>						
(a)	(b)	(c)		(d)			
No. from Part I	Purpose of gift	Use of gift		Description of how gift	is held		
				 			
				<u> </u>			
	(e)						
	Transfer of gift						
	Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee			
			<u> </u>				
							
				· · · · · · · · · · · · · · · · · · ·			
(a)	(b)	(c)		(d)			
No. from Part I	Purpose of gift	Use of gift		Description of how gift	ıs nela 		
		(e)		<u> </u>			
	Transferee's name, addres	Transfer of gift	Rela	ntionship of transferor to transf	aree		
	Transferee s name, address	3, 4114 211 7 4		donsing of dansieror to dansi			
(0)		(0)		(4)			
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift i	is held		
Part I	. 4.655 6. 9.10						
		<u> </u>					
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ľ		(e)			·		
	Transferee's name, addres	Transfer of gift s, and ZIP + 4	Rela	tionship of transferor to transfe	ere e		
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2010	FEDERAL STATEM	· · · · · ·	PAGE		
CLIENT 1435	ST. MARYS COUNCIL NO 1470 I COLUMBUS CHARITIES		33-11097		
2/08/12			05:12P		
STATEMENT 1 FORM 990-PF, PART I, LINE 16 ACCOUNTING FEES	6B				
ACCOUNTING FEES	(A) EXPENSES IN PER BOOKS \$ 1,350. \$ 1,350. \$	(B) NET (C) NVESTMENT ADJUST INCOME NET INC	TED CHARITABLE		
STATEMENT 2 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES	3		<u> </u>		
BANK FEES	(A) EXPENSES IN PER BOOKS TOTAL \$ 6. \$	(B) NET (C NVESTMENT ADJUS INCOME NET INC 6. 6.	C) (D) TED CHARITABLE COME PURPOSES \$ 0.		
					
STATEMENT 3 FORM 990-PF, PART VII-A, LIN SUBSTANTIAL CONTRIBUTOF	RS DURING THE TAX YEAR	OF SUBSTANTIAL CON	NTRIBUTOR		
FORM 990-PF, PART VII-A, LIN SUBSTANTIAL CONTRIBUTOR	RS DURING THE TAX YEAR RIBUTOR ADDRESS CHARITIES ONE COLU	OF SUBSTANTIAL COM MBUS PLAZA CN, CT 06510	NTRIBUTOR		
FORM 990-PF, PART VII-A, LIN SUBSTANTIAL CONTRIBUTOR NAME OF SUBSTANTIAL CONT	RS DURING THE TAX YEAR RIBUTOR ADDRESS CHARITIES ONE COLUNEW HAVE CIL #1470 PO BOX 1	MBUS PLAZA CN, CT 06510	NTRIBUTOR		
FORM 990-PF, PART VII-A, LIN SUBSTANTIAL CONTRIBUTOR NAME OF SUBSTANTIAL CONT SUPREME TREASURER, KOC C KNIGHTS OF COLUMBUS COUN STATEMENT 4 FORM 990-PF, PART VIII, LINE LIST OF OFFICERS, DIRECTOR	RS DURING THE TAX YEAR RIBUTOR ADDRESS CHARITIES ONE COLUNEW HAVE CIL #1470 PO BOX 1 LEONARDT 1 RS, TRUSTEES, AND KEY EMPLO AVERAGE HOURS	OMBUS PLAZA CN, CT 06510 .52 COWN, MD 20650 COMPEN- COMPEN- BUT	NTRIBUTOR NTRI- EXPENSE ION TO ACCOUNT/ P & DC OTHER		
FORM 990-PF, PART VII-A, LIN SUBSTANTIAL CONTRIBUTOR NAME OF SUBSTANTIAL CONT SUPREME TREASURER, KOC C KNIGHTS OF COLUMBUS COUN STATEMENT 4 FORM 990-PF, PART VIII, LINE	RS DURING THE TAX YEAR RIBUTOR ADDRESS CHARITIES ONE COLUNEW HAVE CIL #1470 PO BOX 1 LEONARDT 1 RS, TRUSTEES, AND KEY EMPLO AVERAGE HOURS	OMBUS PLAZA CN, CT 06510 .52 COWN, MD 20650 COMPEN- COMPEN- BUT	NTRI- EXPENSE ION TO ACCOUNT/		

2010

2/03/12

FEDERAL STATEMENTS

PAGE 2

ST. MARYS COUNCIL NO 1470 KNIGHTS OF COLUMBUS CHARITIES, INC.

CLIENT 1435

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33-1109715 09:45AM

STATEMENT 4 (CONTINUED)
FORM 990-PF, PART VIII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	ACCOUNT/
R WILSON 21861 BEEM LN LEONARDTOWN, MD 20650	VICE PRESIDENT 1	\$ 0.	\$ 0.	\$ 0.
J HOFFMAN 22170 BULL RD LEONARDTOWN, MD 20650	DIRECTOR 0.5	0.	0.	0.
W P RUSSELL 20045 TOWER HILL ROAD LEONARDTOWN, MD 20650	TREASURER 1	0.	0.	0.
J SLAUGHTER 42186 WOODSIDE LN LEONARDTOWN, MD 20560	PRESIDENT 1	0.	0.	0.
T SANTANGELO 12415 SEMINOLE RD LUSBY, MD 20657	DIRECTOR 0.5	0.	0.	0.
T BURKE 22961 CHICKORY LANE CALIFORNIA, MD 20619	SECRETARY 1	0.	0.	0.
	TOTAL	\$ 0.	\$ 0.	\$ 0.

STATEMENT 5 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
FATHER ANDREW WHITE SCHOOL P.O. BOX 1756 LEONARDTOWN, MD 20650	N/A	501 (C) (3)	UNRESTRICTED GRANT: CATHOLIC EDUCATION	\$ 6,100.
MOTHER CATHERINE SPALDING 38833 CHAPTICO ROAD HELEN, MD 20635	N/A	501 (C) (3)	UNRESTRICTED GRANT: CATHOLIC EDUCATION	3,000.
HOLY ANGELS 21340 COLTON POINT ROAD AVENUE, MD 20609	N/A	501 (C) (3)	UNRESTRICTED GRANT: RELIGIOUS ACTIVITIES	500.

2010

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FEDERAL STATEMENTS

ST. MARYS COUNCIL NO 1470 KNIGHTS OF COLUMBUS CHARITIES, INC.

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09:45AM

CLIENT 1435

STATEMENT 5 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
SACRED HEART 23080 MADDOX ROAD BUSHWOOD, MD 20618	N/A	501 (C) (3)	UNRESTRICTED GRANT: RELIGIOUS ACTIVITIES	\$ 500.
ST. MARYS RYKEN 22600 CAMP CALVERT ROAD LEONARDTOWN, MD 20650	N/A	501 (C) (3)	UNRESTRICTED GRANT: CATHOLIC EDUCATION	9,500.
OUR LADY'S CHURCH 41348 MEDLEY'S NECK ROAD LEONARDTOWN, MD 20650	N/A	501(C)(3)	UNRESTRICTED GRANT: RELIGIOUS ACTIVITIES	1,500.
ST. ALOYSIUS CHURCH PO BOX 310 LEONARDTOWN, MD 20650	N/A	501 (C) (3)	UNRESTRICTED GRANT: RELIGIOUS ACTIVITIES	1,000.
ST. JOSEPH'S CHURCH PO BOX 175 MORGANZA, MD 20660	N/A	501(C)(3)	UNRESTRICTED GRANT: RELIGIOUS ACTIVITIES	500.
OUR LADY OF THE WAYSIDE 37575 CHAPTICO ROAD CHAPTICO, MD 20621	N/A	501 (C) (3)	UNRESTRICTED GRANT: RELIGIOUS ACTIVITIES	2,000.
SM COUNTY SPECIAL OLYMPICS 25926 WHISKEY CREEK ROAD HOLLYWOOD, MD 20636	N/A	501 (C) (3)	UNRESTRICTED GRANT: SUPPORT OF SPORTS TRAINING AND COMPETITION FOR PEOPLE WITH DISABILITIES	2,595.
THE ARC OF SOUTHERN MD PO BOX 1860 PRINCE FREDERICK, MD 20678	N/A	501 (C) (3)	UNRESTRICTED GRANT: SUPPORT FOR CHILDREN AND ADULTS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES	425.
CARENET PREGNANCY CENTER OF SOUTHERN MD PO BOX 31 LEXINGTON PARK, MD 20653	N/A	501 (C) (3)	UNRESTRICTED GRANT: PREGNANCY COUNSELING	3,000.
BIRTHRIGHT OF SOUTHERN MD, INC P.O. BOX 633 LEONARDTOWN, MD 20650	N/A	501(C)(3)	UNRESTRICTED GRANT: PREGNANCY COUNSELING	500.

2010

2/03/12

FEDERAL STATEMENTS

ST. MARYS COUNCIL NO 1470 KNIGHTS OF COLUMBUS CHARITIES, INC.

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CLIENT 1435

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09:45AM

STATEMENT 5 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
HOSPICE OF ST. MARY'S P.O. BOX 625 LEONARDTOWN, MD 20650	N/A	501 (C) (3)	URESTRICTED GRANT: SUPPORT OF THOSE WITH A LIFE-THREATENING ILLNESS	\$ 1,500.
BOY SCOUTS OF AMERICA TROOP 303 ST. GEORGE EPISCOPAL CHURCH VALLEY LEE, MD 20692	N/A	501 (C) (3)	UNRESTRICTED SUPPORT: YOUTH ACTIVITIES	500.
CENTER FOR LIFE ENRICHMENT P.O. BOX 610 HOLLYWOOD, MD 20636	N/A	501 (C) (3)	UNRESTRICTED GRANT: SUPPORT OF INDIVIDUALS WITH DISABILITIES	1,000.
CHRISTMAS IN APRIL ST MARYS COUNTY P.O. BOX 705 HOLLYWOOD, MD 20636	N/A	501 (C) (3)	UNRESTRICTED GRANT: REHABILITATION OF THE HOMES OF LOW-INCOME HOME OWNERS	500.
HOLY LAND CHRISTIAN ECUMENICAL FDN 6935 WISCONSIN AVE, STE 518 BETHESDA, MD 20815	N/A	501(C)(3)	UNRESTRICTED GRANT: SUPPORT OF ARAB CHRISTIANS IN THE HOLY LAND	300.
ALZHEIMERS ASSOC 3701 PENDER DR, STE 400 FAIRFAX, VA 22030	N/A	501 (C) (3)	UNRESTRICTED GRANT: ALZHEIMERS MEDICAL CARE, SUPPORT, AND RESEARCH	500.
CECIL COUNTY PREGNANCY CENTERS PO BOX 1948 ELKTON, MD 21922	N/A	501 (C) (3)	PURCHASE OF SONOGRAM EQUIPMENT	25,000.
MD STATE COUNCIL KOC CHARITY FUND 10815 STANG RD OWINGS MILLS, MD 21117	N/A	501(C)(3)	UNRESTRICTED GRANT: SUPPORT OF INDIVIDUALS IN TEMPORARY URGENT NEED	1,000.
ST VINCENT DE PAUL SOCIET PO BOX 310 LEONARDTOWN, MD 20650	N/A	501(C)(3)	UNRESTRICTED GRANT: SUPPORT OF PROGRAMS SERVING THE POOR AND NEEDY	1,200.
			TOTAL	\$ 62,620.

Form **8868** (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Form 8868 (Rev 1-2011)

Department of the Treasury Internal Revenue Service

► File a separate application for each return.

• If you are	e filing for an Automatic 3-Month Extension, co	mplete only	Part I and check this box		► [X	
	e filing for an Additional (Not Automatic) 3-Mon				_	
Do not com	plete Part II unless you have already been grant	ed an autor	natic 3-month extension on a previously	filed Form 8868.		
corporation i request an e Associated V	ling (e-file). You can electronically file Form 886 required to file Form 990-T), or an additional (no extension of time to file any of the forms listed in With Certain Personal Benefit Contracts, which ming of this form, visit www.irs.gov/efile and click	it automatic Part I or P Just be seni) 3-month extension of time. You can eli art II with the exception of Form 8870, li t to the IRS in paper format (see instruct	ectronically file Form nformation Return fo	n 8868 to er Transfers	
	utomatic 3-Month Extension of Time.					
	n required to file Form 990-T and requesting an			complete Part I only		
•	porations (including 1120-C filers), partnerships,					
	Name of exempt organization			Employer identification number		
Type or print	St. Marys Council No 1470 Knie Columbus Charities, Inc.	ghts of		33-1109715		
File by the	Number, street, and room or suite number. If a P O. box, see in	nstructions.				
due date for illing your return See	PO Box 152					
nstructions	City, town or post office, state, and ZIP code. For a foreign add	ress, see instru	ctions			
	Leonardtown, MD 20650					
Enter the Re	turn code for the return that this application is fo	or (file a sep	parate application for each return)		01	
Application s For		Return Code	Application Is For		Return Code	
orm 990		01	Form 990-T (corporation)		07	
orm 990-BL		02	Form 1041-A		08	
orm 990-EZ		03	Form 4720		09	
orm 990-PF		04	Form 5227		10	
orm 990-T (section 401(a) or 408(a) trust)	05	Form 6069		11	
,	trust other than above)	06	Form 8870		12	
Telephone If the orga If this is for check this	anization does not have an office or place of bus for a Group Return, enter the organization's four box or a Group Return, enter the organization's four soon is for.	digit Group	United States, check this box			
until_ The exto	st an automatic 3-month (6 months for a corporal 2/15 , 20 12 , to file the exempt organization is for the organization is return for: calendar year 20 or tax year beginning 7/01 , 20 10 x year entered in line 1 is for less than 12 month.	anization re , and ending	turn for the organization named above.	ıl return		
3a If this ai	nge in accounting period pplication is for Form 990-BL, 990-PF, 990-T, 472 ndable credits. See instructions	20, or 6069,	enter the tentative tax, less any	3a \$	0.	
nonrefundable credits. See instructions						
	due. Subtract line 3b from line 3a. Include your (Electronic Federal Tax Payment System). See in			3c \$	0.	
aution. If yo	u are going to make an electronic fund withdraw uctions	al with this	Form 8868, see Form 8453-EO and Form	1 8879-EO for		

BAA For Paperwork Reduction Act Notice, see Instructions.