

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 private foundations)

2017

► Do not enter social security numbers on this form as it may be made public.
 ► Information about Form 990-EZ and its instructions is at www.irs.gov/form990ez.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2017 calendar year, or tax year beginning 01-01-2017

, and ending 12-31-2017

B Check if applicable
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
KNIGHTS OF COLUMBUS 612Number and street (or P. O. box, if mail is not delivered to street address) Room/suite
1200 W 15THCity or town, state or province, country, and ZIP or foreign postal code
HUTCHINSON, KS 67501D Employer identification number
48-6131596E Telephone number
(620) 663-1736

F Group Exemption Number ► 0188

G Accounting Method Cash Accrual Other (specify) ► _____H Check ► if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ► _____

J Tax-exempt status (check only one) - 501(c)(3) 501(c)(8) (insert no) 4947(a)(1) or 527K Form of organization Corporation Trust Association Other NON PROFIT

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, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ 129,049

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

1	Contributions, gifts, grants, and similar amounts received	1	
2	Program service revenue including government fees and contracts	2	11,145
3	Membership dues and assessments	3	5,792
4	Investment income	4	9
5a	Gross amount from sale of assets other than inventory	5a	
b	Less cost or other basis and sales expenses	5b	
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
6	Gaming and fundraising events		
a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b	Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
c	Less direct expenses from gaming and fundraising events	6c	
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
7a	Gross sales of inventory, less returns and allowances	7a	112,103
b	Less cost of goods sold	7b	49,408
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	62,695
8	Other revenue (describe in Schedule O)	8	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ►	9	79,641
10	Grants and similar amounts paid (list in Schedule O)	10	11,370
11	Benefits paid to or for members	11	
12	Salaries, other compensation, and employee benefits	12	
13	Professional fees and other payments to independent contractors	13	
14	Occupancy, rent, utilities, and maintenance	14	
15	Printing, publications, postage, and shipping	15	2,734
16	Other expenses (describe in Schedule O)	16	96,270
17	Total expenses. Add lines 10 through 16 ►	17	110,374
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-30,733
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	276,607
20	Other changes in net assets or fund balances (explain in Schedule O)	20	
21	Net assets or fund balances at end of year Combine lines 18 through 20	21	245,874

Part V Other Information (Note the Schedule A and personal benefit contract 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 significant 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)

35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?

b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O

c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III

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**

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

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), 501(c)(4), and 501(c)(29) 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

c Section 501(c)(3), 501(c)(4), and 501(c)(29) 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), 501(c)(4), and 501(c)(29) 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

41 List the states with which a copy of this return is filed ► _____

42a The organization's books are in care of ► **JAY RUSSELL** Telephone no ► (620) 200-2393

Located at ► 9000 EAST 30TH AVE BUHLER, KS ZIP + 4 ► 67522

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 **FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)**

c At any time during the calendar year, did the organization maintain an office outside 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 ► and enter the amount of tax-exempt interest received or accrued during the tax year ► **43**

44a Did the organization maintain any donor advised funds during the year? 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

45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

45b 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 may need to be completed instead of Form 990-EZ (see instructions)

	Yes	No
33		No
34		No
35a		No
35b		
35c		No
36		No
37b		
38a		No
40b		
40e		
42b		
42c		
43		
44a		No
44b		No
44c		No
44d		
45a		No
45b		No

Additional Data

Software ID: 17005072

Software Version:

EIN: 48-6131596

Name: KNIGHTS OF COLUMBUS 612

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. 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; optional for others.)
<p>28 COLLECT FUNDS FROM PUBLIC TO ASSIST PHYSICALLY AND MENTALLY HANDICAPPED PERSONS-ANNUAL TOOTSIE ROLL DRIVE (Grants \$)</p> <p>If this amount includes foreign grants, check here . . . ► <input type="checkbox"/></p>	<p>28a</p>

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<p>29 SELL PIZZAS AND REFRESHMENTS AT STATE FAIR-MONIES RAISE TOWARD RELIGIOUS EDUCATION PROBLEMS IN HUTCHINSON AND SURROUNDING AREA (Grants \$)</p> <p>If this amount includes foreign grants, check here . . . ► <input type="checkbox"/></p>	<p>29a</p>

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<p>30 ANNUAL SAUSAGE DINNER MONIES RAISED TOWARD RELIGIOUS EDUCATION IN HUTCHINSON TRINTY HIGH SCHOOL (Grants \$)</p> <p>If this amount includes foreign grants, check here . . . ► <input type="checkbox"/></p>	<p>30a</p>

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

~~Internal Revenue Service~~Name of the organization
KNIGHTS OF COLUMBUS 612**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

- ▶ Attach to Form 990 or 990-EZ.
- ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2017**Open to Public
Inspection****Employer identification number**

48-6131596

990 Schedule O, Supplemental Information

Return Reference	Explanation
990EZ PART 1 LINE 10	CHARITABLE DONATIONS 7870 BOY SCOUTS 750 CHRISTMAS GIFT 750 GIRLS STATE 275

990 Schedule O, Supplemental Information

Return Reference	Explanation
990EZ PART 1 LINE 10	SEMINARIAN 750 RELIGIOUS ED 975

990 Schedule O, Supplemental Information

Return Reference	Explanation
990EZ PART 1 LINE 16	ADVERTISING 429 BANK FEE 32 BAR TENDER 2870

990 Schedule O, Supplemental Information

Return Reference	Explanation
990EZ PART 1 LINE 16	CAPITAL ASSESSMENT 3368 REFUND 100 CONVENTION REIMBURSEMENT 213

990 Schedule O, Supplemental Information

Return Reference	Explanation
990EZ PART 1 LINE 16	CORPORATE FEE 40 DUES REIMBURSEMENT 64 EDAP 1200

990 Schedule O, Supplemental Information

Return Reference	Explanation
990EZ PART 1 LINE 16	ENTERTAINMENT PICNIC 316 SMALL EQUIPMENT 585 FINANCIAL SECRETARY 825

990 Schedule O, Supplemental Information

Return Reference	Explanation
990EZ PART 1 LINE 16	FIRE SAFETY 45 INSURANCE 7461 K OF C SOFTBALL TOURNAMENT 1664 LICENSES AND PERMITS 385

990 Schedule O, Supplemental Information

Return Reference	Explanation
990EZ PART 1 LINE 16	LIQUOR TAX 2586 MASS 90 MEMORIAL 32 OFFICE SUPPLIES 53

990 Schedule O, Supplemental Information

Return Reference	Explanation
990EZ PART 1 LINE 16	PER CAPITA SUPREME COUNCIL 11 ACCOUNTING 330 PROPERTY TAX 6487 REPAIRS 1931

990 Schedule O, Supplemental Information

Return Reference	Explanation
990EZ PART 1 LINE 16	BUILDING REPAIRS 20315 EQUIPMENT REPAIRS 418 FAIR STAND REPAIRS 104 PARKING LOT REPAIRS 1302

990 Schedule O, Supplemental Information

Return Reference	Explanation
990EZ PART 1 LINE 16	SALES TAX 6263 SUPPLIES 63 CLEANING SUPPLIES 2522

990 Schedule O, Supplemental Information

Return Reference	Explanation
990EZ PART 1 LINE 16	TELEPHONE 369 UTILITIES 211 UTILITIES CABLE 2964

990 Schedule O, Supplemental Information

Return Reference	Explanation
990EZ PART 1 LINE 16	GAS & ELECTRIC 11159 WATER 531 WEBSITE HOST 12 OTHER EXPENSE 1119

990 Schedule O, Supplemental Information

Return Reference	Explanation
990EZ PART 1 LINE 16	FAIR SPACE CONTRACT 8895 FAIR START UP 1907 MISC START UP 270 SAUSAGE DINNER 79

990 Schedule O, Supplemental Information

Return Reference	Explanation
990EZ PART 1 LINE 16	SAUSAGE DINNER START UP 1424 TERMITE CONTROL 850 TRASH 1096 DEPRECIATION 3280